Case 16-20086 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main

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| Fill in this information to identify your case: | | |
|-------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District of ILLINOIS (State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|------------------------------------------------------------------|-----------------------------------|-----------------------------------------------|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | | |
| Write the name that is on you | our <u>Verlaria</u> First name | First name |
| identification (for example, your driver's license or | L | |
| passport). | Middle name | Middle name |
| Bring your picture identification to your meeting | Bearden Last name | Last name |
| with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or maiden names. | Middle name | Middle name |
| | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of | xxx - xx - 5698 | XXX - XX |
| your Social Security number or federal Individual Taxpayer | OR | OR |
| Identification number | 9xx - xx | 9 xx - xx |

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Verlaria L Document Bearden

Debtor 1

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Case Number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name Business name EIN EIN | Business name Business name EIN EIN |
| | | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 17974 Amherst Ct Number Street Unit 104 | Number Street |
| | | Country Club Hills IL 60478 | |
| | | City State ZIP Code | City State ZIP Code |
| | | COOK | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | have another reason. Explain. (See 28 U.S.C. § 1408 | I have another reason. Explain. (See 28 U.S.C. § 1408 |
| | | | |
| | | | |
| | | | |

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Case Number (if known)

Debtor 1 Verlaria L Document Bearden Page 3 of 68

Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file ☐ Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No bankruptcy within the District | LNBKE | When | 04/23/2010 | Case Number | 10-18229 last 8 years? Yes. District None ___ When ___ __ Case Number ___ MM / DD / YYYY MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with _____ When _____ Case Number, if known _____ you, or by a business MM / DD / YYYY parter, or by affiliate? Relationship to you _ When Case Number, if known ____ District MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12 residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

| Debtor Part | First Name | L Middle Name | Document Bearden | 6 Entered 06/20/16 14:13:19 Page 4 of 68 Case Number (if known) | Desc Main |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| (| Are you a sole proprietor of any full- or part-time ousiness? A sole proprietorship is a pusiness you operate as an individual, and is not a separate legal entity such as a corporation, partnerhsip, or L.C. If you have more than one sole proprietorship, use a separate sheed and attach it or this petition. | ■ No. □ Yes. | ☐ Single Asset Real Esta | State | e Zip Code |
| E a G F L | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | appropriate balance sh documents No. 1 a th | e deadlines. If you indicate the eet, statement of operations, do not exist, follow the proce am not filing under Chapter 1 am filing under Chapter 11, but the Bankruptcy Code. The Bankruptcy Code. The Bankruptcy Code. | court must know whether you are a small business at you are a small business debtor, you must attact cash-flow statement, and federal income tax returned ure in 11 U.S.C. § 1116(1)(B). 1. 1. 1. 1. 1. 1. 1. 1. | ch your most recent rn or if any of these the definition in |
| 14. I | Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to bublic health or safety? Or do you own any property that needs immediate attention? | ■ No. □ Yes. W | /hat is the hazard? | ed, why is it needed? | |

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| . What is the hazard? | | | | |
|---------------------------|---------------|---------------|------|--|
| | | | | |
| | - | | | |
| | | | | |
| If immediate attention is | s needed, why | is it needed? | | |
| | , | _ | | |
| | | | | |
| | | | | |
| Where is the property? | | | | |
| | Number | Street | | |
| | | | | |
| | | | | |
| | | | | |

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Middle Name

| | | | Document | Page 5 of 68 |
|----------|----------|---|----------|------------------------|
| Debtor 1 | Verlaria | L | Bearden | Case Number (if known) |

Last Name

Part 5:

Explain Your Efforts to F

15. Tell the court whether you have received a briefing about credit counseling.

First Name

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| You must check one: | You must check one: |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| I received a briefing from an approved credit | ☐ I received a briefing from an approved credit |
| counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of: | I am not required to receive a briefing about credit counseling because of: |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| Active duty. I am currently on active military duty in a military combat zone. | Active duty. I am currently on active military duty in a military combat zone. |
| If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. |

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Verlaria L Bearden

Debtor 1

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| | First Name | Middle Name Last Nam | ne | | | |
|-----|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--|--|
| Pai | t 6: Answer These Question | ns for Reporting Purposes | | | | |
| 16. | What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. | | | | |
| | | 16b. Are your debts primari | ily business debts? Business debts are d evestment or through the operation of the bus | - | | |
| | | _ | u owe that are not consumer debts or busine: | ss debts. | | |
| 17. | Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be | _ | Chapter 7. Go to line 18. apter 7. Do you estimate that after any exem uses are paid that funds will be available to di | | | |
| | available for distribution to unsecured creditors? | | | | | |
| 18. | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 | | |
| 19. | How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| 20. | How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| Pai | Sign Below | | | | | |
| For | you | correct. If I have chosen to file under Ch | apter 7, I am aware that I may proceed, if eliquiderstand the relief available under each c | gible, under Chapter 7, 11,12, or 13 | | |
| | | | d I did not pay or agree to pay someone who and read the notice required by 11 U.S.C. § 3 | | | |
| | | I request relief in accordance wif | th the chapter of title 11, United States Code | , specified in this petition. | | |
| | | | tement, concealing property, or obtaining mo ult in fines up to \$250,000, or imprisonment fo and 3571. | | | |
| | | /s/ Verlaria L Bearde | | gnature of Debtor 2 | | |
| | | Executed on 06/17/20 | 16 Ex | ecuted on | | |

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| Debtor 1 | Verlaria | L | Bearden | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| ✗ /s/ Cecil Denard Scruggs | Date | Date: 06/20/2016 | | |
|----------------------------------|------------|------------------|-----------|--|
| Signature of Attorney for Debtor | Date | MM / DD / YYYY | _ | |
| Cecil Denard Scruggs | | | | |
| Printed name | | | | |
| Geraci Law L.L.C. | | | | |
| Firm name | | | | |
| 55 E. Monroe St., #3400 | | | | |
| Number Street | | | | |
| Chicago | IL | 60603 | | |
| City | State | ZIP Code | | |
| Contact Phone312-332-1800 | _ Email ad | ndil@geracilaw. | .com — | |
| 6306960 | IL | | | |
| Bar number | State | | | |

| Fill in this information to identify your case: | | | | | | |
|----------------------------------------------------------------------------------------------|------------|-------------|-----------|--|--|--|
| Debtor 1 | Verlaria | L | Bearden | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) | | | | | | |
| Case Number(If known) | | | | | | |
| (II KIIUWII) | | | | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: | Summarize Your Assets | |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|
| | | Your assets Value of what you own |
| 1a. Cop 1b. Cop | le A/B: Property (Official Form 106A/B) by line 55, Total real estate, from Schedule A/B by line 62, Total personal property, from Schedule A/B by line 63, Total of all property on Schedule A/B Summarize Your Liabilities | \$ 0 \$ 11,252 \$ 11,252 |
| 2a. Cop 3. Schedu 3a. Cop | le D: Creditors Who Have Claims Secured by Property (Official Form 106D) y the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | Your liabilities Amount you owe \$16,648 \$0 \$86,517 |
| Copy y | le I: Your Income (Official Form 106I) our combined monthly income from line 12 of Schedule I | \$2,160.76 \$1,583.00 |

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Page 9 of 68 Document Verlaria Case Number (if known) _ First Name Middle Name Last Name **EntriesDescription AssetsAmount LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 2,935.00 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) **\$**_67,791.00 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$<u>67</u>,791.00

9g. Total. Add lines 9a through 9f.

| | Caso 16 | 30086 Doc 1 | Filad 06/20/16 | Entered 06/20/16 14 | 1:13:19 | Desc N | /lain | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------|--------------------|
| Fill in this in | formation to ide | ntify your case and this fil | ing: | 0 of 68 | | 2000 | 10.11 | |
| Debtor 1 | Verlaria | L | Bearden | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States | Bankruptcy Court for | or the : <u>NORTHERN</u> Distri | | | | | | |
| Case Number | | | (State) | | | Cr | neck if this is a | an |
| (If known) | | | | | | an | nended filing | |
| Official F | <u>orm 106A</u> | <u>/B</u> | | | | | | |
| Schedul | e A/B: Pr | operty | | | | | | 12/15 |
| esponsible for ages, write you on the second of the second | supplying corre ur name and cas Describe Each Re- vn or have any le Describe | ct information. If more spa e number (if known). Ansv sidence, Building, Land, or C gal or equitable interest in | ace is needed, attach a separa wer every question. Other Real Esate You Own or Ha n any residence, building, land | l, or similar property? | | | | |
| | - | - | our entries fro Part 1, includir | ing any entries for pages | > | | | \$0.00 |
| Part 2: | Describe Your Vel | nicles | | | | | | |
| you own that so O3. Cars, vans No. Yes. N A C O4. Watercraft Examples: No. Yes. | Describe Describe Describe Make: Model: Year: Approximate Milea Other information: t, aircraft, motor Boats, trailers, motor Describe | Nissan Sentra 2014 15,000 homes, ATVs and other repors, personal watercraft, fishing | ilso report it on Schedule G: E: | ly s and another unity property (see | Do not deduct set the amount of any Creditors Who Ha | y secured cla ave Claims S f the | ims on Schedule ecured by Proper Current value o portion you ow | D: ty of the |
| | | | | > | | | , | \$ 9,551.00 |
| | | sonal and Household Items | | | | | | |
| Do you own o | r have any legal | or equitable interest in any | y of the following items? | | | port Do no | rent value of th ion you own? ot deduct secured emptions | |
| Examples: | | i ishings urniture, linens, china, kitchenw | vare | | | | | |
| Yes. | Describe | Furniture, linens, small applia | nces, table & chairs, bedroom set | | \$1,0 | 000 | \$ | 1,000.00 |

Official Form 106A/B Record # 711291 Schedule A/B: Property Page 1 of 6

Debtor 1 Verlaria Case 16-20086 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Page 11 of 68

| | amples: Telev | | ios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games | |
|----------|------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| | Yes. De | escribe | Flat screen TV, computer, printer, music collection, cell phone \$300 | \$ 300.00 |
| Exa | | ues and figurin | nes; paintings, prints, or other artwork; books, pictures, or other art objects; ollections; other collections, memorabilia, collectibles | |
| | _ | escribe | | \$0.00 |
| Exa | amples: Sport | | nobbies ic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes usical instruments | |
| | _ | escribe | | \$0.00 |
| 10. Fire | No. | | uns, ammunition, and related equipment | |
| 11. Clot | _ | escribe | | \$0.00 |
| | nmples: Every | yday clothes, fu | urs, leather coats, designer wear, shoes, accessories | |
| | Tes. De | SCHDE | Everyday clothes, shoes, accessories \$150 | \$ 150.00 |
| gold | = | yday jewelry, c | ostume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| | Yes. De | escribe | Everyday jewelry, costume jewelry \$250 | \$ 250.00 |
| | -farm anima amples: Dogs, | als , cats, birds, he | orses | \$230.00 |
| | Yes. De | escribe | | \$0.00 |
| 14. Any | other person | onal and ho | usehold items you did not already list, including any health aids you did not list | |
| | Yes. De | escribe | | \$ 0.00 |
| | | | of your entries from Part 3, including any entries for pages you have attached er here | \$1,700.00 |
| Part 4 | Descr | ribe Your Fina | ancial Assets | |
| Do you | own or hav | e any legal o | or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 16. Casl | | ey you have in | your wallet, in your home, in a safe deposit box, and on hand when you file your petition | |
| | - | escribe | | \$ <u> </u> |

Filed 06/20/16
Bearden
Document
Last Name Verlaria Case 16-20086 Entered 06/20/16 14:13:19 Page 12 of 88 humber (if known) Desc Main Doc 1

Debtor 1 First Name Middle Name

| 17. | Deposits of | f money | | | |
|-----|--------------|-----------------------|-----------------------------------|-----------------------------------------------------------------------------|--------------------------|
| | Examples: (| Checking, savings | or other financial accounts; ce | ertificates of deposit; shares in credit unions, brokerage houses, | |
| | and other si | milar institutions. I | f you have multiple accounts w | vith the same institution, list each. | |
| | No. | | | | |
| | Yes. | Describe | Account Type: | Institution name: | |
| | 163. | Describe | | US Bank | e 1.00 |
| | | | Checking Account | OS Balik | \$ <u>1.0</u> 0 |
| | | | | | \$ <u> </u> |
| 18. | Bonds, mu | tual funds, or p | ublicly traded stocks | | |
| | | | | firms, money market accounts | |
| | | | | ······································ | |
| | No. | | | | |
| | Yes. | Describe | Institution or issuer name: | | |
| | | | | | \$0.00 |
| 19. | Non-public | lv traded stock | and interests in incorpora | ated and unincorporated businesses, including an interest in | |
| | No. | • | | J | |
| | INO. | | | | |
| | Yes. | Describe | Name of Entity and Percer | nt of Ownership: | |
| | | | | | \$ <u> </u> |
| 20. | Governmen | nt and corporate | e bonds and other negotia | able and non-negotiable instruments | |
| | | | - | hecks, promissory notes, and money orders. | |
| | - | | | someone by signing or delivering them. | |
| | | able inotramente a | to those you cannot transfer to | rouncone by digning of delivering them. | |
| | No. | | | | |
| | Yes. | Describe | Issuer name: | | |
| | | | | | \$ 0.00 |
| 21. | Retirement | or pension acc | counts | | · · |
| | | - | | hrift savings accounts, or other pension or profit-sharing plans | |
| | | moreoto in not, Ei | (iv), 100(b), 10 | Thirt durings accounted, or other perioden or profit origining plane | |
| | No. | | | | |
| | Yes. | Describe | Type of account and Institu | rution name: | |
| | | | Pension plan | State of Illinois | \$ Unknown |
| | | | | | ÷ 0.00 |
| | | | | | \$ <u> </u> |
| 22. | Security de | posits and pre | payments | | |
| | Your share | of all unused depo | sits you have made so that you | u may continue service or use from a company | |
| | Examples: A | Agreements with la | andlords, prepaid rent, public ut | tilities (electric, gas, water), telecommunications | |
| | No. | | | | |
| | | Describe | Institution name or individu | ual· | |
| | Yes. | Describe | mattation name of individe | uai. | |
| | | | | | \$ <u> </u> |
| 23. | Annuities (| A contract for a | periodic payment of mon | ney to you, either for life or for a number of years) | |
| | No. | | | | |
| | | Dogoribo | Issuer name and description | on: | |
| | Yes. | Describe | issuel fiame and description | on. | |
| | | | | | \$0 <u>.0</u> 0 |
| 24. | Interests in | an education I | RA, in an account in a qua | alified ABLE program, or under a qualified state tuition program. | |
| | 26 U.S.C. § | § 530(b)(1), 529A | (b), and 529(b)(1). | | |
| | No. | | | | |
| | | Describe | Institution name and descr | ription. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| | 165. | Describe | montation name and accer | inputori. Ocparatory file the records of any interests. 11 0.0.0. § 021(0). | |
| | | | | | \$ <u> 0.0</u> 0 |
| 25. | Trusts, equ | iitable or future | interests in property (other | er than anything listed in line 1), and rights or powers | |
| | No. | | | | |
| | | Dogoribo | | | |
| | Yes. | Describe | | | |
| | | | | | \$ <u> </u> |
| 26. | Patents, co | pyrights, trade | marks, trade secrets, and | other intellectual property | |
| | Examples: I | nternet domain na | mes, websites, proceeds from | royalties and licensing agreements | |
| | No. | | | | |
| | = | December | | | |
| | Yes. | Describe | | | |
| | | | | | \$ <u>0.0</u> 0 |
| 27. | Licenses, f | ranchises, and | other general intangibles | | |
| | Examples: E | Building permits, e | xclusive licenses, cooperative a | association holdings, liquor licenses, professional licenses | |
| | No. | | • | | |
| | = | | | | |
| | Yes. | Describe | | | |
| | | | | | e 0.00 |

Case 16-20086 Doc 1 Verlaria

Nο

Yes.

Official Form 106A/B

Describe.....

Record # 711291

Filed 06/20/16 Entered 06/20/16 14:13:19

Desc Main

0.00

Page 4 of 6

Page 13 of 68 clumber (if known) Debtor 1 Döcüment First Name Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions 28. Tax refunds owed to you No. Yes. Describe..... 0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Describe..... 0.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. Describe..... Yes. 0.00 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: Yes. Describe..... Term life insurance \$0 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights No. Yes. Describe..... 0.00 35. Any financial assets you did not already list No. Describe..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2.00 for Part 4. Write that number here---Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned

Schedule A/B: Property

Debtor 1 Verlaria Case 16-20086 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 of 88 Unimber (if known) — Document Page 14 Of 88 Unimber (if known) — Document Page 14 Unimber (if k

39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... Yes. 0.00 41. Inventory No. Describe..... Yes. 0.00 42. Interests in partnerships or joint ventures No. Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No. Yes. Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00

Case 16-20086 Verlaria

Doc 1

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Desc Main

\$11,253.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Döcüment

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... Yes. 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here --> List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$ 9,551.00 56. Part 2: Total vehicles, line 5 \$ 1,700.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$ 2.00 59. Part 5: Total business-related property, line 45 \$ 0.00 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 \$ 0.00 \$ 11,253.00 62. Total personal property. Add lines 56 through 61. \$ 11,253.00

Record # 711291 Official Form 106A/B Page 6 of 6 Schedule A/B: Property

Case 16-20086 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main

| | | 1.7 | Nooumont I |
|---------------------|------------------------|------------------------------------|-----------------|
| Fill in this in | nformation to identif | y your case: | |
| Debtor 1 | Verlaria | L | Bearden |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for t | ne : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u> |
| | | | (State) |
| Case Number | r | | _ |
| (If known) | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | emptions are you claiming? Check | | | |
|-------------------------|------------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------------|--------------------------------------|
| _ | ming state and federal nonbankrupt | | § 522(b)(3) | |
| | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | |
| . For any propert | y you list on <i>Schedule A/B</i> that yo | ou claim as exempt, fill in t | the information below. | |
| • | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | 2014 Nissan Sentra with over 15,000 miles | \$ <u>9,551</u> | \$ <u>2,400</u> | 735 ILCS 5/12-1001(c) - \$2,400.00 |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000 | | 735 ILCS 5/12-1001(b) - \$1,000.00 |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Flat screen TV, computer, printer, music collection, cell phone | \$_300 | | 735 ILCS 5/12-1001(b) - \$300.00 |
| Line from Schedule A/B: | 07 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Everyday clothes, shoes, accessories | \$ <u>150</u> | | 735 ILCS 5/12-1001(a),(e) - \$150.00 |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| Official Form 106C | Record # 711291 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 2 |

Entered 06/20/16 14:13:19 Desc Main Case 16-20086 Doc 1 Filed 06/20/16 Page 17 of 68 Number (if known)

Last Name

Document Verlaria Debtor 1

Middle Name

Additional Page Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B Brief 735 ILCS 5/12-1001(a),(e) - \$250.00 Everyday jewelry, costume jewelry description: \$ 250 Line from 100% of fair market value, up to 12 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(b) - \$1.00 Checking Account, US Bank Brief **\$_** 1 description: 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit Brief Pension plan, State of Illinois 735 ILCS 5/12-1006 - \$0.00 Unknown description: Line from 100% of fair market value, up to 21 Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment .) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No Yes. 711291 Official Form 106C Record # Schedule C: The Property You Claim as Exempt Page 2 of 2

| 1 111 111 1113 1 | nformation to iden | tify your case: | | 20/16 Entore 8 | of 68 | | | |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------|
| Debtor 1 | Verlaria | L | Bear | den | | | | |
| 202(0) | First Name | Middle Name | Last Nam | ne e | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Nam | ne | | | | |
| United State | s Bankruptcy Court fo | r the : <u>NORTHERN</u> | District of ILLINOIS | | | | | |
| Omitod Otato | o zama apto, ocare io | . u.o | (State) | | | | Check if thi | o io on |
| Case Number (If known) | er | | | | | | | 0 10 011 |
| | | | | | | | amended fi | ling |
| Official F | orm 106D | | | | | | | |
| Sahadula | D. Cradita | rc Who Hove | e Claims Secure | d by Proporty | , | | | 12 |
| | | | ried people are filing toge | | | | | |
| | ill in all of the infor | | e court with your other sch | edules. Tou have noth | ig else to report o |) | | |
| for each of | List All Secured Cl ecured claims. If a claim. If more than | creditor has more th | an one secured claim, list the articular claim, list the othe call order according to the c | er creditors in Part 2. | | Column A Amount of claim Do not deduct the value of collateral | Column A Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2. List all so for each (As much | List All Secured Cl ecured claims. If a claim. If more than | creditor has more th | articular claim, list the othe al order according to the c | er creditors in Part 2. | | Amount of claim | Value of collateral that supports this | Unsecured portion |
| 2. List all so for each (As much | List All Secured Cl ecured claims. If a claim. If more than as possible, list the mancial | creditor has more th | articular claim, list the othe al order according to the c | er creditors in Part 2. creditors name. that secures the claim: | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all so for each of As much 2.1 GM Fin | List All Secured Cl ecured claims. If a claim. If more than as possible, list the mancial | creditor has more th | articular claim, list the other all order according to the constraint of the property | er creditors in Part 2. creditors name. that secures the claim: | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fin | List All Secured Cl ecured claims. If a claim. If more than as possible, list the mancial | creditor has more th | articular claim, list the other all order according to the constraint of the property | er creditors in Part 2. creditors name. that secures the claim: | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fin Creditor's Po Box | ecured claims. If a claim. If more than as possible, list the nancial | creditor has more th | articular claim, list the other cal order according to the constitution Describe the property 2014 Nissan Sentra w | er creditors in Part 2. creditors name. that secures the claim: | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fin Creditor's Po Book Number | ecured claims. If a claim. If more than as possible, list the nancial s Name k 181145 | creditor has more th one creditor has a p e claims in alphabetic | articular claim, list the other cal order according to the constitution Describe the property 2014 Nissan Sentra w | er creditors in Part 2. ereditors name. that secures the claim: vith over 15,000 miles | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all se for each of As much 2.1 GM Fill Creditor's Po Box Number Arlingt | ecured claims. If a claim. If more than as possible, list the nancial s Name k 181145 | creditor has more the one creditor has a percentage claims in alphabetic transfer of the control | articular claim, list the other cal order according to the composition of the composition | er creditors in Part 2. ereditors name. that secures the claim: vith over 15,000 miles | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fin Creditor's Po Book Number | ecured claims. If a claim. If more than as possible, list the nancial s Name k 181145 | creditor has more th one creditor has a p e claims in alphabetic | articular claim, list the other call order according to the composition of the continuation | er creditors in Part 2. ereditors name. that secures the claim: vith over 15,000 miles | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fin Creditor's Po Box Number Arlingter City | ecured claims. If a claim. If more than as possible, list the nancial s Name k 181145 | creditor has more the one creditor has a percentage of the claims in alphabetic of the | articular claim, list the other cal order according to the composition of the composition | er creditors in Part 2. creditors name. that secures the claim: vith over 15,000 miles , the claim is: Check all to | | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM File Creditor's Po Box Number Arlingtory City Who owe | ecured claims. If a claim. If more than as possible, list the nancial s Name x 181145 Street | creditor has more the one creditor has a percentage of the claims in alphabetic of the | articular claim, list the other all order according to the composition of the composition of the date you file, and the date you file, an | er creditors in Part 2. creditors name. that secures the claim: vith over 15,000 miles , the claim is: Check all to | nat apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM File Creditor's Po Box Number Arlingtory City Who owe | ecured claims. If a claim. If more than as possible, list the nancial s Name x 181145 Street | creditor has more the one creditor has a percentage of the claims in alphabetic of the | articular claim, list the other cal order according to the call of the cal | er creditors in Part 2. ereditors name. that secures the claim: with over 15,000 miles the claim is: Check all the claim is: all that apply. ade (such as mortgage or secure) | nat apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fill Creditor's Po Box Number Arlingtory City Who owe | ecured claims. If a claim. If more than as possible, list the mancial s Name x 181145 Street s the debt? Check or 1 only 12 only 13 and Debtor 2 only 14 and Debtor 2 only | creditor has more the one creditor has a per claims in alphabetic transport of the control of th | articular claim, list the other cal order according to the call order according to the call of the call o | er creditors in Part 2. ereditors name. that secures the claim: with over 15,000 miles the claim is: Check all the claim is: Check all the claim is: all that apply. ade (such as mortgage or its tax lien, mechanic's lien) | nat apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fill Creditor's Po Box Number Arlingtory City Who owe | ecured claims. If a claim. If more than as possible, list the mancial s Name x 181145 Street | creditor has more the one creditor has a per claims in alphabetic transport of the control of th | articular claim, list the other cal order according to the call order according to the call of the call o | er creditors in Part 2. ereditors name. that secures the claim: vith over 15,000 miles the claim is: Check all the claim is: Check all the claim is: all that apply. ade (such as mortgage or is tax lien, mechanic's lien) | nat apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| 2. List all so for each of As much 2.1 GM Fill Creditor's Po Box Number Arlingtor City Who owe Debtor Debtor At leas | ecured claims. If a claim. If more than as possible, list the mancial s Name x 181145 Street s the debt? Check or 1 only 12 only 13 and Debtor 2 only 14 and Debtor 2 only | TX 76096 State Zip Code | articular claim, list the other cal order according to the call order according to the call of the call o | er creditors in Part 2. ereditors name. that secures the claim: vith over 15,000 miles the claim is: Check all the claim is: Check all the claim is: all that apply. ade (such as mortgage or is tax lien, mechanic's lien) | nat apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |

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|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------|
| FIII IN this | information to identify you | ur case: | | 9 of 68 | | |
| Debtor 1 | Verlaria | L | Bearden | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing | g) First Name | Middle Name | Last Name | | | |
| (Opodac, il lilling | y) I list Name | Wildle Name | East Name | | | |
| United Stat | es Bankruptcy Court for the : | NORTHERN District | of <u>ILLINOIS</u> (State) | | | |
| Case Numb | per | | <u> </u> | | ☐ Check if t | |
| | | | | | amended | i filing |
| <u> </u> | <u>Form 106E/F</u> | | | | | |
| le as comple ist the other t/B: Property reditors with eeded, copy | ete and accurate as possib r party to any executory co v (Official Form 106A/B) an n partially secured claims t | le. Use Part 1 for cre ntracts or unexpired d on Schedule G: Ex that are listed in Sch ut, number the entric name and case num | I leases that could result in recutory Contracts and Und redule D: Creditors Who Ha es in the boxes on the left. I | is and Part 2 for creditors with NONPRIORITY of a claim. Also list executory contracts on Sche- expired Leases (Official Form 106G). Do not index eve Claims Secured by Property. If more space Attach the Continuation Page to this page. On the | dule clude any is | 12/15 |
| 1. Do any c | reditors have priority unse | ecured claims agains | st you? | | | |
| No. | Go to Part 2. | | | | | |
| Yes. | | | | | | |
| each clai nonpriori unsecure | im listed, identify what type of ty amounts. As much as pos ed claims, fill out the Continu | of claim it is. If a clair ssible, list the claims uation Page of Part 1 | n has both priority and nonpoin alphabetical order according | secured claim, list the creditor separately for each riority amounts, list that claim here and show both ing to the creditor's name. If you have more than olds a particular claim, list the other creditors in P uction booklet.) | h priority and two priority | |
| | | | | Total claim | Priority amount | Nonpriority amount |
| Part 2: | List All of Your NONPRIOR | RITY Unsecured Claim | s | | | |
| | reditors have nonpriority ι | unsecured claims ag | ainst vou? | | | |
| | | _ | nis form to the court with you | r other schedules | | |
| Yes. | rou have nothing to report i | Transpart. Cashiir ti | no form to the boart with you | i dilei delledaled. | | |
| 4. List all or nonpriori included | ty unsecured claim, list the | creditor separately fo creditor holds a partic | r each claim. For each claim | for who holds each claim. If a creditor has more a listed, identify what type of claim it is. Do not list ditors in Part 3.If you have more than three nonpri | claims already | |
| 4.1 Admi | n Recovery LLC | l as | st 4 digits of account number | | | Total claim \$ 1,625.00 |
| Credito | r's Name arhart Dr | | en was the debt incurred? | 2014 | | - |
| Numbe | er Street | | | | | |
| Suite | 102 | <u>As</u> | of the date you file, the claim | is: Check all that apply. | | |
| Willia | msville NY | 14221 | Contingent | | | |
| City | | Zip Code | Unliquidated Disputed | | | |
| | ves the debt? Check one. or 1 only | Ц | Бізраюч | | | |
| = | or 2 only | Тур | pe of NONPRIORITY unsecure | ed claim: | | |
| Debt | or 1 and Debtor 2 only | | Student loans | | | |
| At lea | ast one of the debtors and anoth | ner 🔲 | Obligations arising out of a sepa | aration agreement or divorce | | |
| | ck if this claim relates to a | _ | that you did not report as priority | | | |
| | munity debt aim subject to offest? | Ц | Debts to pension or profit-sharin | ng plans, and other similar debts | | |
| No | | | Other. Specify Collecting for | or Creditor | | |
| Yes | | | | | | |

| Debtor 1 | Case 16-20086 Do Verlaria L First Name Middle Name 2: Your NONPRIORITY Unsecured Claims - C | Document Page 20 of 68 Case Number (if known) | _ |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| After lis | ting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Clair |
| 4.2 | ADT Security Services Creditor's Name PO Box 371490 Number Street | Last 4 digits of account number | \$ 220.00 |
| | Pittsburgh PA 15250 City State Zip Code ho owes the debt? Check one. | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt the claim subject to offest? No Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Services Rendered | |
| 4.3 | AmeriCash Loans Creditor's Name 880 Lee St., Ste. 302 Number Street | Last 4 digits of account number | \$ 2,950.00 |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |

| Debtor 1 | Verlaria | Case 16-20086 | 6 Doc 1 | Filed 06/20/16 Bocument | Entered 06/20/16 14:13:19 Page 21 of 68 | Desc Main | |
|----------|-----------------------------|-------------------------------------------|------------------|---------------------------------------------------------------------------|--------------------------------------------|------------------|----------|
| | First Name | Middle N | lame | Last Name | | | |
| Par | 2± Your | NONPRIORITY Unsecured | Claims - Continu | ation Page | | | |
| After li | sting any e | ntries on this page, numb | er them beginn | ing with 4.4, followed by 4. | 5, and so forth. | Total Cl | aiı |
| 4.5 | ATG Cred | it | La | st 4 digits of account numbe | er 3022 | \$ <u>63.00</u> | |
| | Creditor's Nan | ortland St Ste 2 | w | hen was the debt incurred? | 2015-2015 | | |
| | Number | Street | | | | | |
| v | Chicago City /ho owes the | IL 600 State Zip e debt? Check one. | 622 C | of the date you file, the clain Contingent Unliquidated Disputed | m is: Check all that apply. | | |
| | Debtor 1 or | • | ту | pe of NONPRIORITY unsecu | red claim: | | |
| | Debtor 1 a | nd Debtor 2 only | | Student loans | | | |
| [| At least on | e of the debtors and another | | Obligations arising out of a sep | paration agreement or divorce | | |
| | _ | his claim relates to a | _ | that you did not report as priori | | | |
| l: | communi the claim s | ty debt subject to offest? | | Debts to pension or profit-shar | ing plans, and other similar debts | | |
| | No Yes | | | Other. Specify Medical De | ebt | | |
| 4.6 | ATG Cred | it | La | st 4 digits of account numbe | er | \$ <u>270.00</u> | <u>ე</u> |
| | Creditor's Nan 1700 W Co | ortland St Ste 2 | w | hen was the debt incurred? | 2015-2015 | | |
| | | 5501 | Δ | of the date you file the clair | m is: Check all that apply | | |

| 7.0 | | |
|----------------------------------------------------|-------------------------------------------------------------------|------------------|
| Creditor's Name | When was the debt incurred? 2015-2015 | |
| 1700 W Cortland St Ste 2 | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Chicago IL 60622 | = | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | - | |
| | T. (NONDERDITY | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: ☐ | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | _ | |
| No | Other. Specify Medical Debt | |
| Yes | Outer. Opening | |
| 4.6 ATG Credit | Last 4 digits of account number 2067 | \$ 270.00 |
| Creditor's Name | | · |
| 1700 W Cortland St Ste 2 | When was the debt incurred? 2015-2015 | |
| | | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Chicago IL 60622 | Unliquidated | |
| City State Zip Code | | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| | Obligations arising out of a separation agreement or divorce | |
| At least one of the debtors and another | | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Medical Debt | |
| Yes | | |
| 4.7 Capital ONE BANK USA N | Last 4 digits of account number NULL | <u>\$_204.00</u> |
| Creditor's Name | 2011 2015 | |
| 15000 Capital One Dr | When was the debt incurred? 2014-2015 | |
| Number Street | | |
| | As of the data you file the claim is: Check all that apply | |
| | As of the date you file, the claim is: Check all that apply. | |
| Richmond VA 23238 | Contingent | |
| | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | _ | |
| | | |
| No | Other. Specify Credit Card or Credit Use | |

Record # 711291

| | Case 16-2008 | B6 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main | |
|-----------|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------|------------------|
| Debtor 1 | Verlaria L | Gase Number (# Known) | _ |
| | | le Name Last Name | |
| Pari | Your NONPRIORITY Unsecure | ed Claims - Continuation Page | |
| After lis | sting any entries on this page, num | nber them beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.8 | Center for Dental Excellence | Last 4 digits of account number | \$ <u>175.00</u> |
| | Creditor's Name 19615 Governors Hwy Number Street | When was the debt incurred? 2016 | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | | 50422 Unliquidated | |
| W | City State Z Vho owes the debt? Check one. | Zip Code Disputed | |
| | Debtor 1 only | | |
| F | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| F | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| Ļ | At least one of the debtors and another | | |
| L | Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| Is | s the claim subject to offest? | Debts to pension of profit-straining plans, and other similar debts | |
| | No | Other. Specify Medical/Dental Services | |
| | Yes | | 200.00 |
| 4.9 | COMENITY CAPITAL/HSN | Last 4 digits of account number NULL | \$ <u>902.00</u> |
| | Creditor's Name 995 W 122Nd Ave | When was the debt incurred? 2014-2016 | |
| | Number Street | | |
| | Namber Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Westminster CO 8 | Contingent | |
| | | Zio Code Unliquidated | |
| W | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| l. | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | s the claim subject to offest? No Yes | Other. Specify Credit Card or Credit Use | |
| 4.10 | Credit Union One | Last 4 digits of account number | \$ 650.00 |
| 4.10 | Creditor's Name | | * |
| | Box 641457 | When was the debt incurred? 2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 6 | 50664 Unliquidated | |
| | | Zip Code Disputed | |
| V | Who owes the debt? Check one. | | |
| | Debtor 1 only | | |
| Ļ | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | |

At least one of the debtors and another Check if this claim relates to a

community debt

No

Yes

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Is the claim subject to offest?

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify Credit Card or Credit Use

| , | 1 Verlaria L First Name Middle Name 122 Your NONPRIORITY Unsecured Claim | Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Page 23 of 68 Case Number (if known) Last Name ons - Continuation Page em beginning with 4.4, followed by 4.5, and so forth. | |
|------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| 4.11 | Creditor's Name 415 E Main St Number Street | Last 4 digits of account number3425 When was the debt incurred?2012-2012 | \$ <u>115.00</u> |
| | Streator IL 61364 City State Zip Code Who owes the debt? Check one. Debtor 1 only | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| 4.12 | No Yes DEPT OF ED/Navient | Other. Specify Medical Debt Last 4 digits of account number 0306 | \$ <u>415.00</u> |
| | Creditor's Name Po Box 9635 Number Street | When was the debt incurred? 2015-2016 | |
| | | As of the date you file, the claim is: Check all that apply. | |

| | Creditor's Name | When was the debt incurred? 2012-2012 |
|------|----------------------------------------------------|---------------------------------------------------------------------|
| | 415 E Main St | When was the debt incurred? |
| | Number Street | |
| | | As of the date you file, the claim is: Check all that apply. |
| | | Contingent |
| | Streator IL 61364 | Unliquidated |
| ١, | City State Zip Code Who owes the debt? Check one. | Disputed |
| | Debtor 1 only | |
| | Debtor 2 only | Time of NONDRIODITY and a series |
| | = | Type of NONPRIORITY unsecured claim: Student loans |
| | Debtor 1 and Debtor 2 only | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce |
| | Check if this claim relates to a | that you did not report as priority claims |
| | community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts |
| | No | Madical Dakt |
| | Yes | Other. Specify Medical Debt |
| 4 42 | DEPT OF ED/Navient | Last 4 digits of account number 0306 \$_415.00 |
| 4.12 | Creditor's Name | Last 4 digits of account number |
| | Po Box 9635 | When was the debt incurred? 2015-2016 |
| | Number Street | |
| | | As all the state was filled the state to Charlett Hall the state to |
| | | As of the date you file, the claim is: Check all that apply. |
| | Wilkes Barre PA 18773 | Contingent |
| | City State Zip Code | Unliquidated |
| , | Who owes the debt? Check one. | Disputed |
| | Debtor 1 only | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| | Debtor 1 and Debtor 2 only | Student loans |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce |
| | Check if this claim relates to a | that you did not report as priority claims |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts |
| | Is the claim subject to offest? | |
| | No | Other. Specify |
| | Yes | |
| 4.13 | DEPT OF ED/Navient | Last 4 digits of account number 0628 \$_1,009.00 |
| | Creditor's Name | 0044 0040 |
| | Po Box 9635 | When was the debt incurred? 2014-2016 |
| | Number Street | |
| | | As of the date you file, the claim is: Check all that apply. |
| | | Contingent |
| | Wilkes Barre PA 18773 | Unliquidated |
| ١, | City State Zip Code | Disputed |
| | Who owes the debt? Check one. | |
| | Debtor 1 only | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: |
| | Debtor 1 and Debtor 2 only | Student loans |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce |
| | Check if this claim relates to a | that you did not report as priority claims |
| | community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts |
| | No | |
| | Yes | Other. Specify |
| | | |

Case 16-20086 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Page 24 of 68 Case Number (if known) Document Verlaria Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** DEPT OF ED/Navient \$ 1,628.00 Last 4 digits of account number _ Creditor's Name 2012-2016 Po Box 9635 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Wilkes Barre PA 18773 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify _ DEPT OF ED/Navient \$ 1,791.00 4.15 Last 4 digits of account number Creditor's Name 2012-2016 Po Box 9635 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Wilkes Barre 18773 PA Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt

Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Case 16-20086 Page 25 of 68 Case Number (if known) **Document** Verlaria Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.17 | DEPT OF ED/Navient | Last 4 digits of account number | 0628 | \$ <u>2,308.00</u> |
|----------|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------|
| | Creditor's Name | | 2014 2040 | |
| | Po Box 9635 | When was the debt incurred? | 2014-2016 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | Million Down | Contingent | | |
| | Wilkes Barre PA 18773 | Unliquidated | | |
| w | City State Zip Code /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured cl | laim: | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | | |
| Ī | At least one of the debtors and another | Obligations arising out of a separatio | n agreement or divorce | |
| ΙĒ | Check if this claim relates to a | that you did not report as priority claim | ms | |
| _ | community debt | Debts to pension or profit-sharing pla | ans, and other similar debts | |
| Is | the claim subject to offest? | | | |
| | No | Other. Specify | | |
| | Yes DEPT OF ED/Navient | Land della de la companya de la comp | 0406 | \$ 3,522.00 |
| 4.18 | Creditor's Name | Last 4 digits of account number | | \$ 0,022.00 |
| | Po Box 9635 | When was the debt incurred? | 2011-2016 | |
| | Number Street | | | |
| | | As of the date you file the claim is: | Check all that apply | |
| | | As of the date you file, the claim is: | Спеск ан тлат арргу. | |
| | Wilkes Barre PA 18773 | Contingent Unliquidated | | |
| | City State Zip Code | Disputed | | |
| W W | /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| <u> </u> | Debtor 2 only | Type of NONPRIORITY unsecured cl | laim: | |
| <u> </u> | Debtor 1 and Debtor 2 only | Student loans | | |
| <u> </u> | At least one of the debtors and another | Obligations arising out of a separatio | - | |
| L | Check if this claim relates to a | that you did not report as priority claim | | |
| ls | community debt the claim subject to offest? | Debts to pension or profit-sharing pla | ans, and other similar deots | |
| | No | Other. Specify | | |
| ▎ ┌ | Yes | Other. Specify | | |
| 4.19 | DEPT OF ED/Navient | Last 4 digits of account number | 0123 | \$ 3,522.00 |
| | Creditor's Name | | 0040 0040 | |
| | Po Box 9635 | When was the debt incurred? | 2012-2016 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | | Contingent | | |
| | Wilkes Barre PA 18773 | Unliquidated | | |
| w | City State Zip Code /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | _ | | |
| I ₹ | Debtor 2 only | Type of NONPRIORITY unsecured cl | laim: | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | | |
| ∣ ⊦ | At least one of the debtors and another | Obligations arising out of a separatio | on agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority clair | - | |
| | community debt | Debts to pension or profit-sharing pla | | |
| Is | the claim subject to offest? | | | |
| | No | Other. Specify | | |
| | Yes | _ | | |

Official Form 106E/F

Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Case 16-20086 Page 26 of 68 **Document** Verlaria Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| ſ | 4.20 DEPT OF ED/Navient | Last 4 digits of account number _ | 0629 | \$ 3,582.00 |
|-----|----------------------------------------------------|-----------------------------------------|--------------------------------|--------------------|
| Ì | Creditor's Name | | | · |
| ı | Po Box 9635 | When was the debt incurred? | 2013-2016 | |
| ı | Number Street | | | |
| ı | | As of the date you file, the claim is | : Check all that apply. | |
| ı | | Contingent | , | |
| ı | Wilkes Barre PA 18773 | Unliquidated | | |
| ı | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| ı | Debtor 1 only | ш . | | |
| ı | Debtor 2 only | Type of NONPRIORITY unsecured | olaim: | |
| ı | Debtor 1 and Debtor 2 only | Student loans | Ciaiii. | |
| ı | At least one of the debtors and another | Obligations arising out of a separat | tion agreement or divorce | |
| ı | Check if this claim relates to a | that you did not report as priority cl | | |
| ı | community debt | Debts to pension or profit-sharing p | | |
| ı | Is the claim subject to offest? | | | |
| ı | No | Other. Specify | | |
| | Yes PERIOD ED Novins | | | 0.001.00 |
| Į | 4.21 DEPT OF ED/Navient | Last 4 digits of account number _ | 0815 | \$ <u>3,894.00</u> |
| ı | Creditor's Name Po Box 9635 | When was the debt incurred? | 2008-2016 | |
| ı | Number Street | When was the dept incurred: | | |
| ı | Number Sueet | | | |
| ı | | As of the date you file, the claim is | : Check all that apply. | |
| ı | Wilkes Barre PA 18773 | Contingent | | |
| ı | City State Zip Code | Unliquidated | | |
| ı | Who owes the debt? Check one. | Disputed | | |
| ı | Debtor 1 only | | | |
| ı | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| ı | Debtor 1 and Debtor 2 only | Student loans | | |
| ı | At least one of the debtors and another | Obligations arising out of a separat | | |
| ı | Check if this claim relates to a | that you did not report as priority cla | | |
| ı | community debt Is the claim subject to offest? | Debts to pension or profit-sharing p | plans, and other similar debts | |
| ı | No | Пан а и | | |
| ı | Yes | Other. Specify | | |
| Ī | 4.22 DEPT OF ED/Navient | Last 4 digits of account number | 0716 | \$ 4,961.00 |
| Ì | Creditor's Name | _ | | |
| ı | Po Box 9635 | When was the debt incurred? | 2013-2016 | |
| | Number Street | | | |
| ı | | As of the date you file, the claim is | : Check all that apply. | |
| | | Contingent | | |
| ı | Wilkes Barre PA 18773 | Unliquidated | | |
| ı | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| ı | Debtor 1 only | _ | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separat | tion agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority cl | | |
| | community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | Is the claim subject to offest? | _ | | |
| | ■ No □ | Other. Specify | | |
| - 1 | I IVos | | | |

| Debtor 1 | Mandania | 16-20086 L | Doc 1 | Filed 06/20/16 Document | Entered 06/20/16 14:13:19 Page 27 of 68 Case Number (if known) | Desc Main | _ | |
|----------|-----------------------------|---------------------------|----------------|--------------------------------------------------------------|----------------------------------------------------------------------|-----------|--------------------|--|
| | First Name | Middle Name | | Last Name | | | | |
| Par | Your NONPRIOR | ITY Unsecured Clai | ms - Continu | ation Page | | | | |
| After li | sting any entries on th | is nago number ti | nom hoginni | ng with 4.4, followed by 4.5 | and so forth | | Total Clain | |
| AILEI II | sting any entires on th | ns page, number u | ieiii begiiiii | ing with 4.4, followed by 4.5 | , and so forth. | | Total Glain | |
| 4.23 | DEPT OF ED/Navient | t | La | st 4 digits of account number | r 0815 | | \$ <u>6,552.00</u> | |
| | Creditor's Name | | | • | | | | |
| | Po Box 9635 | | WI | en was the debt incurred? | 2008-2016 | | | |
| | Number Street | | | | | | | |
| | | | As | of the date you file, the clain | n is: Check all that apply. | | | |
| | | | | Contingent | | | | |
| | Wilkes Barre | PA 18773 | | Unliquidated | | | | |
| v | City Vho owes the debt? Che | State Zip Code ck one. | | Disputed | | | | |
| | Debtor 1 only | | | | | | | |
| | Debtor 2 only | | Ту | pe of NONPRIORITY unsecur | red claim: | | | |
| Ī | Debtor 1 and Debtor 2 of | only | | Student loans | | | | |
| Ī | At least one of the debto | ors and another | | Obligations arising out of a separation agreement or divorce | | | | |
| lī | Check if this claim re | lates to a | | that you did not report as priority claims | | | | |
| ' | community debt | | | Debts to pension or profit-shari | ng plans, and other similar debts | | | |
| 1 | s the claim subject to of | fest? | | | | | | |
| | No | | | Other. Specify | | | | |
| \vdash | Yes | | | | | | | |
| 4.24 | DEPT OF ED/Navient | <u> </u> | . La | st 4 digits of account number | r <u>0123</u> | | \$ 7,675.00 | |
| | Creditor's Name | | | | 2012-2016 | | | |
| | Po Box 9635 | | _ Wi | nen was the debt incurred? | 2012 2010 | | | |
| | Number Street | | | | | | | |
| | · | | As | of the date you file, the clain | n is: Check all that apply. | | | |
| | | . | | Contingent | | | | |
| | Wilkes Barre | PA 18773 | . \Box | Unliquidated | | | | |

| 4.23 BELLIOLEBINAVIOLE | Last 4 digits of account number | \$ <u>0,002.00</u> |
|---------------------------------------------------|-----------------------------------------------------------------------------------|---------------------|
| Creditor's Name | | |
| Po Box 9635 | When was the debt incurred? 2008-2016 | |
| Number Street | | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Wilkes Barre PA 18773 | = * | |
| | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| _ | | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Student loans | |
| Debtor 1 and Debtor 2 only | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Debts to pension of profit-sharing plans, and other similar debts | |
| | _ | |
| No | Other. Specify | |
| Yes | _ | |
| 4.24 DEPT OF ED/Navient | Last 4 digits of account number 0123 | \$ _7,675.00 |
| Creditor's Name | | |
| | When was the debt incurred? 2012-2016 | |
| Po Box 9635 | when was the debt incurred? | |
| Number Street | | |
| | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Wilkes Barre PA 18773 | Unliquidated | |
| City State Zip Code | | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| At least one of the debtors and another | | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | D 04 0if- | |
| │ | Other. Specify | |
| Yes DEDT OF ED Alexicate | 0400 | * 7.004.00 |
| 4.25 DEPT OF ED/Navient | Last 4 digits of account number 0406 | \$ _7,984.00 |
| Creditor's Name | | |
| Po Box 9635 | When was the debt incurred? 2011-2016 | |
| Number Street | | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | * ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | |
| Wilkes Barre PA 18773 | Contingent | |
| | Unliquidated | |
| City State Zip Code | Disputed | |
| Who owes the debt? Check one. | □ ······ | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l = ' | | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| . – | | |
| community debt | Dobto to popular or profit charing plane, and other similar debts | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |

| Debtor 1 | First Name Middle Name | Document Page 28 of 68 Case Number (if known) | _ |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| After lis | sting any entries on this page, number them | beginning with 4.4, followed by 4.5, and so forth. | Total Clair |
| 4.26 | Devry INC Creditor's Name 814 Commerce Dr Number Street | Last 4 digits of account number 6980 When was the debt incurred? 2012-2016 | \$ <u>740.00</u> |
| V | Oak Brook IL 60523 City State Zip Code Who owes the debt? Check one. | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt s the claim subject to offest? No Yes | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Debt Owed | |
| 4.27 | Dynamic Recovery Solutions Creditor's Name PO Box 25759 Number Street | Last 4 digits of account number | \$ <u>1,165.00</u> |
| | | As of the date you file, the claim is: Check all that apply. Contingent | |

Greenville SC 29616 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___Credit Extended to Debtor(s) Yes First Premier BANK NULL \$ 828.00 Last 4 digits of account number 4.28 Creditor's Name 2010-2011 601 S Minnesota Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Sioux Falls SD 57104 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use

Record # 711291

| Debtor 1 | First Name Middle Name | Document Page 29 of 68 Case Number (if known) | _ |
|-----------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| After lis | sting any entries on this page, number th | em beginning with 4.4, followed by 4.5, and so forth. | Total Clair |
| 4.29 | Full Circle Financial Creditor's Name P.O. Box 2438 Number Street | Last 4 digits of account number | \$ <u>285.00</u> |
| V | Largo FL 33779 City State Zip Code Who owes the debt? Check one. | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | No Yes | Other. Specify Debt Owed | . 050 00 |
| 4.30 | Home Shopping Network Creditor's Name 1 HSN Drive Number Street | Last 4 digits of account number | \$ <u>350.00</u> |
| | | As of the date you file, the claim is: Check all that apply. | |

| 4.29 | Full Circle Financial | Last 4 digits of account number | <u>\$ 285.00</u> |
|------------|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| | Creditor's Name | | |
| | P.O. Box 2438 | When was the debt incurred? 2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | | |
| | Largo FL 33779 | Contingent | |
| | City State Zip Code | Unliquidated | |
| l v | Vho owes the debt? Check one. | Disputed | |
| 1 | Debtor 1 only | - | |
| 1 7 | | Turns of NONDRIGHTY was sound alsima | |
| } | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| [| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| <u> </u> | s the claim subject to offest? | | |
| | No | Other. Specify Debt Owed | |
| | Yes | • / | |
| 4.30 | Home Shopping Network | Last 4 digits of account number | \$ 350.00 |
| | Creditor's Name | | |
| 1 | 1 HSN Drive | When was the debt incurred? 2015 | |
| | Number Street | | |
| | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Saint Petersburg FL 33729 | Contingent | |
| | | Unliquidated | |
| v | City State Zip Code Who owes the debt? Check one. | Disputed | |
| li | | | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| 1 r | Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| l: | s the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| Ī | Yes | | |
| 4.31 | ICTV Brands | Last 4 digits of account number | \$ 195.00 |
| 7.01 | Creditor's Name | • · · · · · · · · · · · · · · · · · · · | |
| 1 | 400 Devon Park Drive | When was the debt incurred? 2016 | |
| | Number Street | | |
| | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| 1 | M | Contingent | |
| | Wayne PA 19087 | Unliquidated | |
| , | City State Zip Code Who owes the debt? Check one. | Disputed | |
| ľ | | | |
| | Debtor 1 only | | |
| <u> </u> | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| Ι Γ | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| l i | Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| l Is | s the claim subject to offest? | See the second process of the second proces of the second process of the second process of the second pr | |
| | No | Other. Specify Debt Owed | |
| ı | Yes | Other. Specify | |

| | Case 16-2 | 20086 D | | Entered 06/20/16 14:13:19 | Desc Main | |
|------------|-----------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------------------------------------------------------------------------------------------------------------|---------------------------|----------------|-------|
| Debtor 1 | Verlaria | L | Document Pa | age 30 of 68 | | |
| | First Name | Middle Name | Last Name | | | |
| Part 2 | Your NONPRIORITY Un | secured Claims | Continuation Page | | | |
| After list | ing any entries on this pag | e, number them | beginning with 4.4, followed by 4.5, and | d so forth. | Total | Clai |
| 4.32 | Illinois Lending Corp. | | Last 4 digits of account number | | \$ <u>1,26</u> | 30.00 |
| - | Creditor's Name 15008 S. Lagrange Rd. Number Street | | When was the debt incurred? | 2016 | | |
| - | City no owes the debt? Check one. | IL 60462 State Zip Code | As of the date you file, the claim is: Contingent Unliquidated Disputed | Check all that apply. | | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim relates to | | Type of NONPRIORITY unsecured c Student loans Obligations arising out of a separation that you did not report as priority clain | on agreement or divorce | | |
| ls t | community debt the claim subject to offest? | , u | Debts to pension or profit-sharing pla | | | |
| | No Yes | | Other. Specify PayDay Loan | | | |
| 4.33 | Kohls/Capone Creditor's Name | | Last 4 digits of account number | NULL | \$ <u>574.</u> | .00 |

| Creditor's Name 15008 S. Lagrange Rd. | When was the debt incurred? 2016 | |
|----------------------------------------------------|-----------------------------------------------------------------------|----------|
| Number Street | | |
| | As of the date year file the plains in Oberland that could | |
| | As of the date you file, the claim is: Check all that apply. | |
| Orland Park IL 60462 | Contingent | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| ■ No | Other. Specify PayDay Loan | |
| Yes Kohls/Capone | Last 4 digits of account number NULL \$574.00 | \dashv |
| 4.33 Kons/Capone Creditor's Name | Last 4 digits of account number | |
| N56 W 17000 Ridgewood Dr | When was the debt incurred? 2013-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Menomonee Falls WI 53051 | | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | Other, Specify Credit Card or Credit Use | |
| Yes | Other. Specify Credit Card or Credit Use | |
| 4.34 Navient | Last 4 digits of account number 1128 \$ 16,684.00 | ╛ |
| Creditor's Name | | |
| Po Box 9500 | When was the debt incurred? 2003-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Wilkes Barre PA 18773 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | that you did not report as priority claims | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | 5556 to position of profit ordining plants, and outer official doubte | |
| No | Other. Specify | |
| Yes | <u> </u> | |

| Debtor 1 | Case 16-20086 Verlaria L First Name Middle Name 2: Your NONPRIORITY Unsecured City | Bearden Last Name | 16 Entered 06/20/16 14:13:19 Page 31 of 68 Page 31 of 68 | Desc Main |
|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------------|----------------|
| After lis | ting any entries on this page, number | them beginning with 4.4, followed b | by 4.5, and so forth. | Total Clair |
| 4.35 | SLM Financial CORP Creditor's Name 11100 Usa Pkwy Number Street | Last 4 digits of account nu When was the debt incurre | 2000 2000 | \$ <u>0.00</u> |
| | Fishers IN 46037 City State Zip Co ho owes the debt? Check one. | Contingent Unliquidated | claim is: Check all that apply. | |
| | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt the claim subject to offest? No | that you did not report as Debts to pension or profit | a separation agreement or divorce | |
| 4.30 | Yes SLM Financial CORP Creditor's Name 11100 Usa Pkwy Number Street | Last 4 digits of account nu | 0815 | \$ <u>0.00</u> |
| | | As of the date you file, the | claim is: Check all that apply. | |

Fishers IN 46037 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify Yes Syncb/CARE CREDIT NULL \$ 0.00 4.37 Last 4 digits of account number Creditor's Name 2014-2015 950 Forrer Blvd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Kettering OH 45420 Unliquidated City
Who owes the debt? Check one. State Zip Code Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify ____ Credit Card or Credit Use No

| Debtor ' | Madada | 16-20086 L | Doc 1 | Filed 06/20/16 Document | Entered 06/20/16 1 Page 32 of 68 Case Number (if kno | 4:13:19 Desc Mai | n |
|----------|------------------------------------------------------------------------|------------------------|---------------|----------------------------------------------------------------------|------------------------------------------------------------|------------------|--------------------|
| | First Name | Middle Name | | Last Name | · · | , | |
| Par | Your NONPRIOR | ITY Unsecured Cla | ims - Continu | ation Page | | | |
| Δfter li | sting any entries on th | is nage number t | hem heginni | ing with 4.4, followed by 4. | 5 and so forth | | Total Clain |
| | og, o | page, | | g, | ., | | |
| 4.38 | Synchrony BANK | | _ La | st 4 digits of account number | r 6120 | | \$ 1,180.00 |
| | Creditor's Name 2365 Northside Dr Ste | 30 | w | hen was the debt incurred? | 2015-2015 | | |
| | Number Street | | | | | | |
| | | | As | of the date you file, the clai | n is: Check all that apply. | | |
| v | San Diego City Vho owes the debt? Che | CA 92108 State Zip Cod | e | Contingent Unliquidated Disputed | | | |
| | Debtor 1 only | | | | | | |
| [| Debtor 2 only Debtor 1 and Debtor 2 o | , | Ty | pe of NONPRIORITY unsecu Student loans | | | |
| | At least one of the debto | | | Obligations arising out of a sep that you did not report as prior | • | | |
| L Is | Check if this claim rel community debt s the claim subject to of | | | | ing plans, and other similar debts | | |
| | No Yes | | | Other. Specify Unknown (| Credit Extension | | |
| 4.39 | US BANK | | _ La | st 4 digits of account number | rNULL | | \$ <u>2,001.00</u> |
| | Creditor's Name 4325 17Th Ave S Number Street | | _ w ! | nen was the debt incurred? | 2015-2016 | | |
| | Fargo | ND 58125 | | of the date you file, the clain Contingent Unliquidated | n is: Check all that apply. | | |

| 4.30 | Last 4 digits of account number | ¥ |
|-------------------------------------------------|--------------------------------------------------------------------------|--------------------|
| Creditor's Name | When was the debt incurred? 2015-2015 | |
| 2365 Northside Dr Ste 30 | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| San Diego CA 92108 | Contingent | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | _ | |
| No Dy | Other. Specify Unknown Credit Extension | |
| Yes US BANK | Last 4 digits of account number NULL | \$ 2,001.00 |
| 4.39 US BANK Creditor's Name | Last 4 digits of account numberNULL | Ψ, |
| 4325 17Th Ave S | When was the debt incurred? 2015-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Fargo ND 58125 | Unliquidated | |
| City State Zip Code | Disputed | |
| Who owes the debt? Check one. | | |
| Debtor 1 only | Toward NONDRIODITY and a labor | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| At least one of the debtors and another | that you did not report as priority claims | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | Dobbe to periodicit of profit ordining plants, and office offinial dobbe | |
| No | Other. Specify Credit Card or Credit Use | |
| Yes | | |
| 4.40 Vision Financial Servi | Last 4 digits of account number8960 | <u>\$_74.00</u> |
| Creditor's Name | When was the debt incurred? 2015-2016 | |
| 1900 W Severs Rd | When was the debt incurred? 2015-2016 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| La Porte IN 46350 | Contingent | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | - W. F. 18 W | |
| No Dy | Other. Specify Medical Debt | |
| I ITES | | |

| Debtor 1 | First Name Middle Name | Document Page 33 of 68 Case Number (if known) | _ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| After lis | sting any entries on this page, number the | m beginning with 4.4, followed by 4.5, and so forth. | Total Clair |
| 4.41 | Vision Financial Servi Creditor's Name 1900 W Severs Rd Number Street | Last 4 digits of account number3627 When was the debt incurred?2015-2015 | \$ <u>449.00</u> |
| V | La Porte IN 46350 City State Zip Code Vho owes the debt? Check one. | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| 4.42 | No Yes Vision Financial Servi | Other. Specify Medical Debt Last 4 digits of account number 8320 | \$ 487.00 |
| 7.72 | Creditor's Name 1900 W Severs Rd Number Street | When was the debt incurred? 2015-2016 | |
| | | As of the date you file, the claim is: Check all that apply. | |

| Creditor's Name | When was the debt incurred? 2015-2015 | | | | |
|----------------------------------------------------|-------------------------------------------------------------------|--------|--|--|--|
| 1900 W Severs Rd | When was the debt incurred? | | | | |
| Number Street | | | | | |
| <u> </u> | As of the date you file, the claim is: Check all that apply. | | | | |
| La Darta IN 40050 | Contingent | | | | |
| La Porte IN 46350 | Unliquidated | | | | |
| City State Zip Code Who owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Student loans | | | | |
| Debtor 1 and Debtor 2 only | | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| No | Madical Dalid | | | | |
| Yes | Other. Specify Medical Debt | | | | |
| 4.42 Vision Financial Servi | Last 4 digits of account number 8320 \$\(\) | 487.00 | | | |
| Creditor's Name | Lust 4 digits of account number | | | | |
| 1900 W Severs Rd | When was the debt incurred? 2015-2016 | | | | |
| Number Street | | | | | |
| | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | |
| La Porte IN 46350 | Contingent | | | | |
| City State Zip Code | Unliquidated | | | | |
| Who owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is the claim subject to offest? | | | | | |
| No | Other. Specify Medical Debt | | | | |
| Yes | Other. Speeding | | | | |
| 4.43 World Finance Corporat | Last 4 digits of account number 4101 \$ | 408.00 | | | |
| Creditor's Name | | | | | |
| 4318 W. 211Th Street | When was the debt incurred? 2016-2016 | | | | |
| Number Street | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | |
| | Contingent | | | | |
| Matteson IL 60443 | Unliquidated | | | | |
| City State Zip Code | | | | | |
| Who owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is the claim subject to offest? | | | | | |
| No | Other. Specify | | | | |
| Yes | - | | | | |

Official Form 106E/F

Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Case 16-20086 Doc 1 Page 34 of 68 Number (if known) **Document** Verlaria Debtor 1 First Name **\$** 125.00 Zingo Cash 4.44 Last 4 digits of account number Creditor's Name 200 N. Fairway Dr. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Vernon Hills Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest?

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

List Others to Be Notified for a Debt That You Already Listed

Part 3:

Other. Specify Payday

Case 16-20086 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main Page 35 of 68 Case Number (if known) Document

Verlaria Debtor 1

Add the Amounts for Each Type of Unsecured Claim

| l | 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|---|----|---------------------------------------------------------|-------------------------------------------------------------------------------|
| l | | Add the amounts for each type of unsecured claim. | |

| | | | Total claim |
|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 |
| | | | |
| | | | Total claim |
| Total claims from Part 2 | 6f. Student loans | 6f. | Total claim \$67,791.00 |
| | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | 67 704 00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$ 67,791.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other | 6g. | \$ |

| | | Caso 16 | 20086 Doc 1 | Filod 06/20/16 | Entor | ed 06/20/16 14 | 1:13:19 | Desc Main | |
|-------|------------------------|----------------------|---------------------------------------------------------------|-------------------------------------------------------------|----------------|---------------------------|--------------------------------|-----------------|------|
| Fi | ll in this in | formation to ident | ify your case: | | | 6 of 68 | | | |
| D | ebtor 1 | Verlaria | L | Bearden | - | | | | |
| D | ebtor 2 | First Name | Middle Name | Last Name | | | | | |
| | pouse, if filing) | First Name | Middle Name | Last Name | - | | | | |
| U | nited States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | | | | | | |
| | ase Number f known) | | | (State) | | | | Check if this i | |
| Off | icial F | orm 106G | | | | | | | |
| | | | ory Contracts and | Unexpired Lea | ises | | | | 12/1 |
| Be as | complete | and accurate as p | oossible. If two married peopled, copy the additional page | le are filing together, bot e, fill it out, number the e | h are equally | responsible for suppl | ying correct n the top of a | ny | |
| | | · - | e and case number (if known) contracts or unexpired leases | | | | | | |
| ·· - | _ | - | ubmit this form to the court wit | | ou have noth | ing else to report on thi | is form. | | |
| Ī | _ | | nation below even if the contra | | | | | | |
| | | | | | | , , , | , | | |
| | | | or company with whom you h | | | | | | |
| | nexpired le | | cell phone). See the instructio | ns for this form in the insti | truction booki | et for more examples of | r executory co | ontracts and | |
| | Person or | company with wh | om you have the contract or | lease | | State what the co | ntract or lease | e is for | |
| 2.1 | | | | | | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | _ | | | | |
| | City | | State Ziņ |) Code | _ | | | | |
| 2.2 | | | | | | | | | |
| 2.2 | Name | | | | _ | | | | |
| | | | | | _ | | | | |
| | Number | Street | | | | | | | |
| | City | | State Zip | Code | | | | | |
| 2.3 | | | | | | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | _ | | | | |
| | | | | | _ | | | | |
| | City | | State Zip | o Code | | | | | |
| 2.4 | | | | | | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | _ | | | | |
| | | | | | _ | | | | |
| | City | | State Zip | O Code | | | | | |
| 2.5 | | | | | _ | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | | | | | |
| | | | | | | | | | |

State Zip Code

City

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| Fill in this in | formation to ident | tify your case: | |
|---------------------|----------------------|-------------------------------------|------------------|
| Debtor 1 | Verlaria | L | Bearden |
| | First Name | Middle Name | Last Name |
| Debtor 2 | - | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |
| Case Number | | | (State) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A | any Additional Pages, write your name and case number (if known). Answer every question. | | | | | | | |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------|---------------------|----------------------------------------------------------------------------------|--|--|--|
| 1. D | 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) | | | | | | | |
| | No. | | | | | | | |
| | Yes | | | | | | | |
| | 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Lousiiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) | | | | | | | |
| | No. Go to line 3. | | | | | | | |
| | Yes. Did your sp | ouse, former spouse, or legal ed | uivalent live with you at the | time? | | | | |
| | _ | n community state or territory die | d you live? | Fill in the n | ame and current address of that person. | | | |
| | Name of your spo | use, former spouse or legal equivalent | | | | | | |
| | Number St | reet | | | | | | |
| | City | | State | Zip Code | | | | |
| 3 In | - | f vour codebtors. Do not inclu | | • | is filing with you. List the person | | | |
| | | Form 106D), Schedule E/F (Off edule G to fill out Column 2. debtor | icial Form 106E/F), or Sche | dule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply: | | | |
| 3.1 | | | | | Schedule D, line | | | |
| | Name | | | _ | Schedule E/F, line | | | |
| | Number Stre | et | | | Schedule G, line | | | |
| | City | S | tate Z | Zip Code | | | | |
| 3.2 | | | | _ | Schedule D, line | | | |
| | Name | | | _ | Schedule E/F, line | | | |
| | Number Stre | et | | _ | Schedule G, line | | | |
| | City | S | tate Z | Zip Code | _ | | | |
| 3.3 | | | | _ | Schedule D, line | | | |
| | Name | | | _ | Schedule E/F, line | | | |
| | Number Stre | et | | | Schedule G, line | | | |
| | City | S | tate Z | Zip Code | | | | |

Official Form 106H Record # 711291 Schedule H: Your Codebtors Page 1 of 1

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| formation to identi | firmania acces | | |
|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| | ry your case: | | |
| Verlaria | L | Bearden | |
| First Name | Middle Name | Last Name | |
| First Name | Middle Name | Last Name | |
| Bankruptcy Court for t | the : <u>NORTHERN DISTRICT C</u> | OF ILLINOIS | |
| | | | Check if this is: |
| | | | An amended filing |
| | | | A supplement showing post-petition |
| | | | chapter 13 income as of the following of |
| orm 106I | | | MM / DD / YYYY |
| | First Name First Name Bankruptcy Court for the second se | First Name Middle Name First Name Middle Name Bankruptcy Court for the :NORTHERN DISTRICT C | First Name Middle Name Last Name First Name Middle Name Last Name Bankruptcy Court for the : |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Describe Employment | | | | | |
|----|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------|----------------------------------|-----------------------------------|--|
| 1. | Fill in your employment information | | Debtor 1 | | Debtor 2 or non-filing spouse | |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | X Employed Not employe | d | Employed Not employed | |
| | Include part-time, seasonal, or self-employed work. | Occupation | Public Aide Assis | stant | | |
| | Occupation may Include student or homemaker, if it applies. | Employers name | Illinois Departme | ois Department of Human Services | | |
| | | Employers address | 822 S. College | | | |
| | | | Springfield, IL 62 | 704 | 3 | |
| | | | | | | |
| | | How long employed there? | 2 Years | | | |
| D: | art 2: Give Details About Monthl | by Images | | | | |
| | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space | ve more than one employer, combi | ine the information for | • | | |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, o | • | \$2,935.00 | \$0.00 | | |
| 3. | Estimate and list monthly overti | | \$0.00 | \$0.00 | | |
| 4. | Calculate gross income. Add line | e 2 + line 3. | | \$2,935.00 | \$0.00 | |

 Official Form 106I
 Record # 711291
 Schedule I: Your Income
 Page 1 of 2

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Verlaria Debtor 1

Document Bearden First Name Middle Name Last Name

Case Number (if known) _

| | | | | For Debtor 1 | | r Debtor 2 or n-filing spouse | | |
|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------|------|----------------------------------|-------|----------|
| | Copy | line 4 here | 4. | \$2,935.00 | | \$0.00 | | |
| 5. L i | st all | payroll deductions: | | | | | | |
| | 5a. T | ax, Medicare, and Social Security deductions | 5a. | \$309.46 | | \$0.00 | | |
| | 5b. N | landatory contributions for retirement plans | 5b. | \$117.40 | | \$0.00 | | |
| | 5c. V | oluntary contributions for retirement plans | 5c. | \$0.00 | | \$0.00 | | |
| | 5d. F | Required repayments of retirement fund loans | 5d. | \$0.00 | | \$0.00 | | |
| | 5e. lı | nsurance | 5e. | \$279.98 | | \$0.00 | | |
| | 5f. D | Domestic support obligations | 5f. | \$0.00 | | \$0.00 | | |
| | 5g. U | Inion dues | 5g. | \$67.40 | | \$0.00 | | |
| | 5h. C | Other deductions. Specify: | 5h. | \$0.00 | | \$0.00 | | |
| 6. A d | ld the | payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$774.24 | | \$0.00 | | |
| 7. C a | lcula | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$2,160.76 | | \$0.00 | | |
| 8. Lis | st all o | other income regularly received: | | | _ | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | | |
| | | profession, or farm | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | | monthly net income. | 8a. | \$0.00 | | \$0.00 | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 0.00 | | \$ 0.00 | | |
| | | dependent regularly receive | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | |
| | | settlement, and property settlement. | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.00 | | |
| | 8e. | Social Security | 8e. | \$0.00 | | \$0.00 | | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | | \$0.00 | | |
| | | Include cash assistance and the value (if known) of any non-cash | | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | | Specify: | | | | | | |
| | 8g. | Pension or retirement income | 8g. _ | \$0.00 | | \$0.00 | | |
| | 8h. | Other monthly income. Specify: | 8h. _ | \$0.00 | _ | \$0.00 | | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9 | \$0.00 | _ | \$0.00 | | |
| 10. | | ulate monthly income. Add line 7 + line 9. | 10. | \$2,160.76 | + | \$0.00 = | : [; | 2,160.76 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | _ | | | | | |
| 11. | Inclu | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives. | | nts, your roommates, ar | d | | | |
| | Do n | ot include any amounts already included in lines 2-10 or amounts that are n | not available | to pay expenses listed in | Sche | dule J. | | |
| | Spec | ify: | | | | | 11 | \$0.00 |
| 12. | 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies \$2. | | | | | | | |
| 13. | | ou expect an increase or decrease within the year after you file this form | | , | • • | | | |
| | X ¹ | | | | | | | |

| Fill in this ir | nformation to identify ye | our case: | | | | |
|---------------------------------|-----------------------------------------------------------------------|--------------------------------------------------|-------------------------------|-------------------------------------------------------------------------|----------------------------------------|------------------------|
| Debtor 1 | Verlaria | L | Bearden | Check if this is | : | |
| | First Name | Middle Name | Last Name | An amend | Ū | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | ment showing pos s of the following | st-petition chapter 13 |
| United States | Bankruptcy Court for the : | NORTHERN DISTRICT | OF ILLINOIS | | | uate. |
| Case Numbe | r | | | MM / DD | / YYYY | |
| , , | | | | A separat | e filing for Debtor | 2 because Debtor 2 |
| Official F | orm 106J | | | maintains | a separate hous | ehold. |
| Schedul | le J: Your Ex | penses | | | | 12/14 |
| ·= | | | = = | are equally responsible for suppl ges, write your name and case nu | | |
| Part 1: | Describe Your Household | ı | | | | |
| | Go to line 2. Does Debtor 2 live in a No. | separate household? st file a separate Schedu | ıle J. | | | |
| 2. Do you | have dependents? | No | | Dependent's relationship to | Dependent's | Does dependent live |
| Do not li Debtor 2 | st Debtor 1 and | | t this information for | Debtor 1 or Debtor 2 | age | with you? |
| | | each deper | ident | Daughter | 16 | X Yes |
| names. | tate the dependents' | | | | | X No |
| | | | | | | Yes |
| | | | | | | X No |
| | | | | | | Yes |
| | | | | | | x No |
| | | | | | | |
| | | | | | | Yes |
| | | | | | | No No |
| | | | | | | Yes |
| expense | expenses include es of people other than f and your dependents? | X No Yes | | | | |
| Part 2: | Estimate Your Ongoing M | lonthly Expenses | | | | |
| | of a date after the bankr | | - | n as a supplement in a Chapter 13 check the box at the top of the fo | • | |
| | = | = | ance if you know the value | | | Your expenses |
| or such assist | ance and have included | a it on <i>Scriedule I: You</i> | Income (Official Form 106l.) |) | | Tour expenses |
| | - | expenses for your resid | lence. Include first mortgage | payments and | | 00,000 |
| _ | for the ground or lot. cluded in line 4: | | | | 4. | \$800.00 |
| | eal estate taxes | | | | 4 a. | \$0.00 |
| | ear estate taxes operty, homeowner's, or | renter's insurance | | | 4a. 4b. | \$0.00 |
| | operty, nomeowners, or ome maintenance, repair | | | | 4c. | \$10.00 |
| | omeowner's association | | | | 4d. | \$0.00 |
| | | | | | | |

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Last Name

Verlaria

Middle Name

Debtor 1

First Name

Case Number (if known) _

| | First Name Middle Name Last Name | | | |
|----------------|------------------------------------------------------------------------------------------------------|------|--------------|----------|
| | | | Your expense | es |
| 5. A | dditional Mortgage payments for your residence, such as home equity loans | 5. | | \$0.00 |
| 6. U | tilities: | | | |
| 6 | a. Electricity, heat, natural gas | 6a. | | \$50.00 |
| 61 | b. Water, sewer, garbage collection | 6b. | | \$0.00 |
| 60 | c. Telephone, cell phone, internet, satellite, and cable service | 6c. | | \$125.00 |
| 60 | d. Other. Specify: | 6d. | \$ | 0.00 |
| 7. F | ood and housekeeping supplies | 7. | | \$250.00 |
| 3. C | hildcare and children's education costs | 8. | | \$0.00 |
| 9. C | othing, laundry, and dry cleaning | 9. | | \$20.00 |
| 10. P | ersonal care products and services | 10. | | \$15.00 |
| 11. M | edical and dental expenses | 11. | | \$25.00 |
| 12. T ı | ransportation. Include gas, maintenance, bus or train fare. | 12. | | \$185.00 |
| D | o not include car payments. | | | |
| 13. E | ntertainment, clubs, recreation, newspapers, magazines, and books | 13. | | \$0.00 |
| 14. C | haritable contributions and religious donations | 14. | | \$0.00 |
| 15. In | surance. | | | |
| D | o not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 1 | 5a. Life insurance | 15a. | | \$23.00 |
| 1 | 5b. Health insurance | 15b. | | \$0.00 |
| 15 | 5c. Vehicle insurance | 15c. | | \$80.00 |
| 1 | 5d. Other insurance. Specify: | 15d. | | \$0.00 |
| 16. T a | axes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| s | pecify: | 16. | | \$0.00 |
| 17. In | stallment or lease payments: | | | |
| 1 | 7a. Car payments for Vehicle 1 | 17a. | | \$0.00 |
| 1 | 7b. Car payments for Vehicle 2 | 17b. | | \$0.00 |
| 1 | 7c. Other. Specify: | 17c. | | \$0.00 |
| | 7d. Other. Specify: | 17d. | | \$0.00 |
| | our payments of alimony, maintenance, and support that you did not report as deducted | | | |
| fr | om your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | | \$0.00 |
| | ther payments you make to support others who do not live with you. | | | |
| S | pecify: | 19. | | \$0.00 |
| | ther real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | | |
| | Da. Mortgages on other property | 20a. | | \$ 0.00 |
| | Db. Real estate taxes | 20b. | \$ | 0.00 |
| | 0c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | Dd. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | De. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

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| Debtor | 1 veria | aria L | Bearden | Case Number (if known) | | |
|--------|----------|-------------------------------------------------------------------------------------------|----------------------------------------|------------------------|------|------------|
| | First N | ame Middle Name | Last Name | | | |
| 21. | Other. S | Specify: | | _ | 21. | \$0.00 |
| 22 | Your mo | onthly expense: Add lines 4 through 21. | | | 22. | \$1,583.00 |
| | The resu | ult is your monthly expenses. | | | _ | |
| | | | | | | |
| | | | | | | |
| 23. | Calculat | te your monthly net income. | | | | |
| | 23a. | Copy line 12 (your comibined monthly i | ncome) from Schedule I. | | 23a. | \$2,160.76 |
| | 23b. | Copy your monthly expenses from line | 22 above. | | 23b | \$1,583.00 |
| | 23c. | Subtract your monthly expenses from y | our monthly income. | | 23c. | \$577.76 |
| | | The result is your monthly net income. | · | | L | , |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 24. | _ | expect an increase or decrease in your e | • | | | |
| | | nple, do you expect to finish paying for you e payment to increase or decrease because | | | | |
| | X No | , , | se of a modification to the terms of y | our mortgage: | | |
| | Yes | | | | | |
| | Ш '« | S. Explain Flore. | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

 Official Form 106J
 Record # 711291
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in | ill in this information to identify your case: | | | | | |
|---------------------------|------------------------------------------------|-----------------------------------|------------------------------|--|--|--|
| Debtor 1 | Verlaria | L | Bearden | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u> (State) | | | |
| Case Number (If known) | · | | | | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Did you pay or agree to pay someone who is NO | OT an attorney to help you fill out bankruptcy forms? |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have re correct. | ad the summary and schedules filed with this declaration and that they are true and |
| 🗶 /s/ Verlaria L Bearden | x |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 06/17/2016 MM / DD / YYYY | DateMM / DD / YYYY |

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| | | D(| ounch ra | GC TT C |
|---------------------|-----------------------|----------------------------------------|------------|---------|
| Fill in this in | formation to ider | ntify your case: | | |
| | | | | |
| Debtor 1 | Verlaria | 1 | Bearden | |
| Debtor 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| L l=:t==d Ot=t== | Danis and a Count for | ather NODTHEDN District of | II I INOIO | |
| United States | Bankruptcy Court to | or the : <u>NORTHERN</u> District of _ | (State) | |
| Case Number | r | | _ | |
| (If known) | | | | |
| | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

| | nswer every question. | neet to this form. On the to | p of any auditional pages, write your name and case | |
|----------------------|-------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------|-------------------------------|
| Part 11 Give Det | tails About Your Marital Status and W | here You Lived Before | | |
| 01. What is your cur | rent marital status? | | | |
| Married | | | | |
| Not married | | | | |
| 02 During the last 3 | years, have you lived anywhere ot | her than where you live no | w? | |
| No. | fills of some one board in the lead O | De wet bedeut en en | To a constant | |
| Yes. List all o | f the places you lived in the last 3 year | ars. Do not include where yo | ou live now. | |
| Debtor 1 | | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| | and territories include Arizona, Cali | | community property state or territory? (Community evada, New Mexico, Puerto Rico, Texas, Washington, | |
| No. | | | | |
| ☐ Yes. Make su | re you fill out Schedule H: Your Code | ebtors (Official Form 106H). | | |
| | | | | |
| Part 2: Explain | the Sources of Your Income | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
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| | | | | |
| Official Form 107 | Record # 711291 \$ | Statement of Financial Affa | irs for Individuals Filing for Bankruptcy | page ' |

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Debtor 1 Verlaria Bearden Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, \$16,032 Wages, commissions, From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$32,073 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$28,016 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Pension Withdrawal \$1,561 For last calendar year: (January 1 to December 31, 2014) List Certain Payments You Made Before You Filed for Bankruptcy

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| Debto | r 1 <u>Verlaria</u> | <u> </u> | L | Bearden | | Case Number (if known) | |
|-------|--------------------------|----------------------|--------------------------------------------------------|------------------------|------------------------------|----------------------------------------------------------|--------------------------|
| | First Name | | Middle Name | Last Name | | | |
| 06 | Are either D | ebtor 1's or Debto | or 2's debts primarily cor | sumer debts? | | | |
| | No. Neit | her Debtor 1 nor [| Debtor 2 has primarily co | onsumer debts. Co | ensumer debts are define | ed in 11 U.S.C. § 101(8) a | as |
| | "inc | urred by an individ | ual primarily for a persona | al, family, or housel | hold purpose." | | |
| | Dur | ng the 90 days be | fore you filed for bankrup | tcy, did you pay any | y creditor a total of \$6,22 | 25* or more? | |
| | | No. Go to line 7. | | | | | |
| | | Yes. List below ea | ach creditor to whom you | paid a total of \$6,22 | 25* or more in one or mo | ore payments and the | |
| | _ | total amount you p | paid that creditor. Do not i | include payments fo | or domestic support obli | gations, such as | |
| | | child support and | alimony. Also, do not incl | ude payments to ar | n attorney for this bankru | uptcy case. | |
| | * Subjec | t to adjustment on | 4/01/16 and every 3 year | rs after that for case | es filed on or after the da | ate of adjustment. | |
| | _ | | 2 or both have primarily of efore you filed for bankru | | ny creditor a total of \$60 | 00 or more? | |
| | | No. Go to line 7. | | , | , | | |
| | | | | | | | |
| | | | ach creditor to whom you | | | | |
| | | | clude payments for dome not include payments to a | | | Jort and | |
| | | ammony. 7 400, 40 | not include payments to t | an automoy for time i | barmapiey sass. | | |
| | | | | Dates of | Total amount paid | Amount you still | owe Was this payment for |
| | | | | payments | | | |
| | | OM Fire a sigh | D. D. 404445 | Manufalia | 04.400 | 040.040 | □ Madaaaa |
| | | | Po Box 181145 | Monthly | \$1,182 | \$16,648 | Mortgage ■ Car |
| | | Arlington TX 7 | 76096 | | | | Credit card |
| | | | | | | | Loan repayment |
| | | | | | | | Suppliers or vendors |
| | | | | | | | Other |
| | | | | | | | - |
| | | | | | | | |
| | | | | | | | |
| 07 | - | | or bankruptcy, did you ma | | | | |
| | | • | | , , | | of which you are a gener ir voting securities; and ar | • |
| | • | • | | | | nents for domestic suppor | |
| | such as child | support and alimo | ony. | | | | |
| | No. | | | | | | |
| | Yes. List | all payments to an | n insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | paymont | paid | omo | |
| 08 | - | before you filed for | or bankruptcy, did you ma | ake any payments o | or transfer any property o | on account of a debt that I | penefited |
| | an insider? Include payn | nents on debts qua | aranteed or cosigned by a | n insider. | | | |
| | No. | 3 | , | | | | |
| | | all payments to an | n insider. | | | | |
| | _ | | | Dates of | Total amount | Amount you still | Reason for this payment |
| | | | | payment | paid | owe | Include creditor's name |
| P | art 4: Iden | tify Legal actions, | Repossessions, and Fored | closures | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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| Debto | r 1 | Verlaria | L | Bearden | Case Number (if kno | own) | |
|-------|-------------------|------------------------|-----------------------------------------------------------------|---------------------------------|------------------------------------------------------------------------------|--------------------------|---------------------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 09 | List | | cluding personal injury cases, | | ction, or administrative proceeding? collection suits, paternity actions, st | | |
| | | No. | | | | | |
| | \Box | Yes. Fill in the detai | ils. | | | | |
| | | | | Nature of the case | Court or agency | | Status of the case |
| 10 | Che | eck all that apply and | u filed for bankruptcy, was any d fill in the details below. | y of your property repossessed, | foreclosed, garnished, attached, se | eized, or levied? | |
| | | No. Go to line 11 | | | | | |
| | | Yes. Fill in the infor | mation below. | | | | |
| 11 | | - | you filed for bankruptcy, did yment because you owed a c | | or financial institution, set off any | y amounts from y | our accounts |
| | | No. Go to line 11 | | | | | |
| | = | Yes. Fill in the infor | mation below. | | | | |
| 12 | _ | | | any of your property in the pos | session of an assignee for the be | nefit of creditors. | а |
| | | | er, a custodian, or another o | | · · | ŕ | |
| | 1 | No. | | | | | |
| | | Yes. | | | | | |
| | | | | | | | |
| | art 5 | | fts and Contributions | | | | |
| 13 | Wit | hin 2 years before y | you filed for bankruptcy, did | you give any gifts with a total | value of more than \$600 per perso | n? | |
| | | No. | | | | | |
| | | Yes. Fill in the detai | ils for each gift. | | | | |
| 14 | Wit | hin 2 years before y | you filed for bankruptcy, did | you give any gifts or contribut | ions with a total value of more tha | ın \$600 to any ch | arity? |
| | | No. | | | | | |
| | $\overline{\Box}$ | Yes. Fill in the detai | ils for each gift. | | | | |
| | | | | | | | |
| P | art 6 | List Certain Lo | sses | | | | |
| 15 | | hin 1 year before yo | ou filed for bankruptcy or sin | ce you filed for bankruptcy, di | d you lose anything because of th | eft, fire, other dis | saster, or |
| | | No. | | | | | |
| | = | Yes. Fill in the detai | ils for each gift. | | | | |
| | | | · · | | | | |
| P | art 7 | List Certain Pa | yments or Transfers | | | | |
| | | | | | | | |
| 16 | abo | out seeking bankrup | otcy or preparing a bankrupto | cy petition? | our behalf pay or transfer any propies for services required in your b | | ou consulted |
| | | No. | | | | | |
| | | Yes. Fill in the detai | ils | | | | |
| | _ | | | | | | |
| | | Party Contact Info | | Description and value of an | y property transferred | Date payment or transfer | Amount of payment |
| | | Geraci Law L.L.C. | | | | | Payment/Value: |
| | | 55 E. Monroe Stre | eet #3400 | | | | \$4,000.00: \$0.00 paid prior to filing, |
| | | Chicago,IL 60603 | | | | | balance to be paid |
| | | | | | | | through the plan. |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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Verlaria Bearden Case Number (if known) _ First Name Middle Name Last Name **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services Hananwill Credit Counseling 2016 \$25.00 115 N. Cross St Robinson, IL 62454 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. Describe any property or payments received Date transfer Description and value of property transferred or debts paid in exchange was made \$400 Debtor sold her 1996 Toyota June 2016 Unknown Buyer Camry for parts. Person's relationship to you 19 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No. Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No. Yes. Fill in the details. Who else had access to it? Do you still Describe the contents have it?

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| Debtor 1 | Verlaria | L | Bearden | Case Number (if known) | | | |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------|--------------------------------------------|-----------------------|--|--|
| | First Name | Middle Name | Last Name | | | | |
| 22 H | ave you stored property i | n a storage unit or plac | e other than your home within 1 | year before you filed for bankruptcy? | | | |
| | No. | | | | | | |
| _ | | | | | | | |
| L | Yes. Fill in the details. | | | | | | |
| | | Who | else has or had access to it? | Describe the contents | Do you still have it? | | |
| | | | | | | | |
| Part | Identify Property Yo | ou Hold or Control for So | meone Else | | | | |
| | o you hold or control any or someone. | property that someone | e else owns? Include any proper | rty you borrowed from, are storing for, or | hold in trust | | |
| | No. | | | | | | |
| F | Yes. Fill in the details. | | | | | | |
| _ | _ | When | e is the property? | Describe the property | Value | | |
| | | | | | | | |
| Part | Give Details About | Environmental Information | on | | | | |
| For th | e purpose of Part 10, the | following definitions ap | oply: | | | | |
| ha ind | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize | | | | | | |
| 11. | or used to own, operate, o | or utilize it, iliciaaling al | sposai sites. | | | | |
| | azardous material means abstance, hazardous mate | • | | waste, hazardous substance, toxic | | | |
| Repor | rt all notices, releases, an | d proceedings that you | know about, regardless of whe | n they occurred. | | | |
| 24 H | as any governmental unit | t notified you that you r | may be liable or potentially liable | e under or in violation of an environment | al law? | | |
| | No. | | | | | | |
| - | Yes. Fill in the details. | | | | | | |
| L | Tes. Fill III the details. | Govo | rnmental unit | Environmental law, if you know it | Date of notice | | |
| | | GOVE | innental unit | Environmentariaw, ii you know it | Date of Hotice | | |
| 25 H | ave you notified any gove | ernmental unit of any re | elease of hazardous material? | | | | |
| | No. | | | | | | |
| _ | | | | | | | |
| L | Yes. Fill in the details. | 0 | | Fredrice months have been been be | Data of water | | |
| | | Gove | rnmental unit | Environmental law, if you know it | Date of notice | | |
| 26 H | ave you been a party in a | ny judicial or administr | ative proceeding under any env | ironmental law? Include settlements and | orders. | | |
| | No | | | | | | |
| _ | No. | | | | | | |
| L | Yes. Fill in the details. | | , | | 21.1 | | |
| | | Cour | t or agency | Nature of the case | Status of the case | | |
| | Give Details About | Your Business or Connec | stiens to Any Business | | | | |
| Part | Give Details About | Tour Business or Connec | tions to Any Business | | | | |
| 27 W | ithin 4 years before you | filed for bankruptcy, did | d you own a business or have ar | ny of the following connections to any bu | siness? | | |
| | A sole proprietor or | self-employed in a trac | de, profession, or other activity, | either full-time or part-time | | | |
| | ☐A member of a limit | ed liability company (L | LC) or limited liability partnershi | ip (LLP) | | | |
| | ☐ A partner in a partn | | , | | | | |
| | = ' | - | of a composation | | | | |
| | = ' | or managing executive | · | | | | |
| | ∐An owner of at leas | t 5% of the voting or eq | uity securities of a corporation | | | | |
| | No. None of the above a | annlies Go to Part 12 | | | | | |
| - | | | tails helow for each husiness | | | | |
| L | _ res. Oneck all that appl | y above and iii in the 06 | tails below for each business. | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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| Debtor 1 | Verlaria | L | Bearden | Case Number (if known) | |
|------------|------------------------------|-------------|--------------------------------------|---------------------------------------------------------------------------------------------------|-----|
| | First Name | Middle Name | Last Name | | |
| | thin 2 years before y | | you give a financial statement to | anyone about your business? Include all financial | |
| | No. | | | | |
| | Yes. Fill in the detail | ils. | | | |
| | | Date is: | sued | | |
| Part 12 | Sign Below | | | | |
| 18 U | .s.C. §§ 152, 1341, 1 | · | × | | |
| ~ | Signature of Debtor | | Signature of De | ebtor 2 | |
| | Date 06/17/2016 MM / DD / | | Date | D / YYYY | |
| ■ ! | No Yes | | of Financial Affairs for Individuals | Filing for Bankruptcy (Official Form 107)? uptcy forms? | |
| . | No | | | | |
| | Yes. Name of perso | on | | . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 11) | 9). |

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| | | Case No: | | |
|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | Chapter: | Chapter 13 | |
| SCLOSURE OF COM | IPENSATION OF A | TTORNEY FOR DEF | BTOR | |
| r before the filing of th | e petition in bankrup | tcy, or agreed to be paid | d to me, for service | es |
| accept | \$4,000.00 | | | |
| I have received | \$0.00 | | | |
| | \$4,000.00 | | | |
| d to me was: | | | | |
| : (specify | | | | |
| aid to me is: | | | | |
| · (·································· | | | | |
| • • | ensation with any oth | er person unless they ar | e members and as | sociates |
| | er en a | | | |
| - | • | • | | sociates |
| e, I have agreed to reno | der legal service for a | Il aspects of the bankru | ptcy | |
| ial situation, and rende | ering advice to the de | btor in determining who | ether to file a petit | tion in |
| etition, schedules, state | ements of affairs and | plan which may be requ | uired; | |
| the meeting of creditor | ors and confirmation l | nearing, and any adjour | ned hearings there | eof; |
| | | | | |
| e above-disclosed fee | does not include the f | following service: | | |
| | | | | |
| CI | ERTIFICATION | | | |
| regoing is a complete s | tatement of any agree | ement or arrangement for | or | |
| f the debtor(s) in this b | pankruptcy proceeding | gs. | | |
| | s/ Cecil Denard Scru | iggs | | |
| 2 | Signature of Attorney | | | |
| | Fed. Bankr. P. 2016(b) or before the filing of the he debtor(s) in contemn accept I have received d to me was: : (specify aid to me is: : (specify above-disclosed compensate, I have agreed to rendered action, schedules, state the meeting of creditors above-disclosed fee of the debtor(s) in this beginning is a complete soft the debtor(s) in this beginning in the filing of the debtor(s) in this beginning is a complete soft the debtor(s) in this beginning in the filing of the debtor(s) in this beginning is a complete soft the debtor(s) in this beginning in the filing of the debtor(s) in this beginning in the debtor(s) in the debtor(s) in this beginning in the debtor(s) in the d | Fed. Bankr. P. 2016(b), I certify that I am the response the filing of the petition in bankrup the debtor(s) in contemplation of or in connect accept S4,000.00 I have received S0.00 \$4,000.00 d to me was: (specify above-disclosed compensation with any other verbisclosed compensation with a other persect, I have agreed to render legal service for a still situation, and rendering advice to the desertion, schedules, statements of affairs and the meeting of creditors and confirmation I above-disclosed fee does not include the fee above-disclosed fee does not include the fee above-disclosed fee does not include the fee fee above-disclosed fee does not include the fee fee fee fee fee fee fee fee fee f | Chapter: CLOSURE OF COMPENSATION OF ATTORNEY FOR DEE Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above refere the filing of the petition in bankruptcy, or agreed to be paid the debtor(s) in contemplation of or in connection with the bankrupt accept \$4,000.00 I have received \$0.00 \$4,000.00 d to me was: (specify aid to me is: (specify above-disclosed compensation with any other person unless they are redisclosed compensation with a other person or persons who are received, I have agreed to render legal service for all aspects of the bankrupt and situation, and rendering advice to the debtor in determining where the meeting of creditors and confirmation hearing, and any adjourned the meeting of creditors and confirmation hearing, and any adjourned above-disclosed fee does not include the following service: CERTIFICATION | Chapter: Chapter 13 CLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) is before the filing of the petition in bankruptcy, or agreed to be paid to me, for service the debtor(s) in contemplation of or in connection with the bankruptcy case is as followed by the contemplation of the petition of the debtor(s) in contemplation of the petition with the bankruptcy case is as followed by the contemplation of the petition with the bankruptcy case is as followed by the contemplation of the bankruptcy case is as followed by the contemplation of the bankruptcy case is as followed by the contemplation of the bankruptcy case is as followed by the contemplation of the bankruptcy and to me was: It is specify the contemplation with any other person unless they are members and as the contemplation with any other person or persons who are not members or as the contemplation of the bankruptcy case is as followed by the contemplation of the bankruptcy of the bankruptcy case is as followed by the contemplation of the bankruptcy and to me was: It is specify the debtor of the bankruptcy bankruptc |

711291 Page 1 of 1 Record #

Geraci Law L.L.C. Name of law firm

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NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN **CHAPTER 13 DEBTORS AND THEIR ATTORNEYS**

(Court-Approved Retention Agreement, revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- 3. Personally review with the debtor and size the complete proficen, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



- 2. Inform the debtor that the debtor must be among the content of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



C. Case 16-20086 Doc 1 Filed 06/20/16 Entered 06/20/16 14:13:19 Desc Main ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00

| 3. Before signing this agreement, the attorney has received ,\$_ | \mathcal{O} | | |
|------------------------------------------------------------------|---------------|-----|---------------|
| toward the flat fee, leaving a balance due of \$ 4000; | and \$ _ | 310 | _for expenses |
| leaving a balance due for the filing fee of \$ | | | |



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4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 5 /31 / 16

Signed:

Verlaria Bearder

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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Digeracinkaw Lage 58 of 68

National Headquarters: 55 E. Monroe Street, #3400 Chicago, IL 60603 1-866-925-1313 help@geracilaw.com



Date: 5/31/2016

Consultation Attorney: JMV

Record #: 711-291

Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility.

Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.

My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other:______

My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other ______

Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly

Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge.

Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters.

If I am eligible to receive a tax refund during my Chapter 13, I understand! must turn it over to the Chapter 13 Trustee unless! am specifically advised that! do not need to. This may change on a yearly basis, so! must check with my attorneys every year. I also understand that if! receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement,! MUST notify my attorney immediately and! may have to pay some or all of the funds into my Chapter 13 plan.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic/support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened.

| X · | Verlaria Bearden | X | |
|-----|-------------------------------------------------------|----------------|--|
| _ | (Verlaria Bearden (Debtor) | (Joint Debtor) | |
| | | • | |
| Х | | Dated: | |
| _ | Aftorney for the Debtor(s) Representing Geraci Law L. | L.C. | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Verlaria L Bearden / Debtor | Bankruptcy Docket #: |
|-----------------------------|----------------------|
| | Judge: |

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 06/17/2016 /s/ Verlaria L Bearden

Verlaria L Bearden

X Date & Sign

Record # 711291 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Document ia L Bearden / Debtor In re Verlaria L Bearden /

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B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 711291 Page 1 of 2 Record #

Form B 201A, Notice to Consumer Debtor(s)

In re Verlaria L Bearden /

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 06/17/2016 | /s/ Verlaria L Bearden | | |
|-------------------|--------------------------|--|--|
| | Verlaria L Bearden | | |
| | | | |
| | | | |
| Dated: 06/20/2016 | /s/ Cecil Denard Scruggs | | |

/s/ Verlaria I Rearden

Attorney: Cecil Denard Scruggs

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| btor 1 | Verlaria | L Bearden | Case Number (if i | known) | | |
|-----------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--|--|
| DIOI 1 | First Name | Middle Name Last Name | | | | |
| | | | | | | |
| art 6: | Answer These Questions | | | | | |
| | hat kind of debts do but have? | 16a. Are your debts primarily α as "incurred by an individual p | consumer debts? Consumer debts are def rimarily for a personal, family, or household p | ined in 11 U.S.C. § 101(8) purpose." | | |
| у. | | No. Go to line 16b. Yes. Go to line 17. | | | | |
| | | 16b. Are your debts primarily to money for a business or inves | pusiness debts? Business debts are debts trends the busines transfer or through the operation of the busines | s that you incurred to obtain ss or investment. | | |
| | | No. Go to line 16c. Yes. Go to line 17. | | | | |
| | | 16c. State the type of debts you ov | we that are not consumer debts or business o | lebts. | | |
| | | | | | | |
| | re you filing under Chapter 7? | No. I am not filing under Cha | | | | |
| - | Oo you estimate that after | Yes. I am filing under Chapte administrative expense: | er 7. Do you estimate that after any exempt p s are paid that funds will be available to distri | broperty is excluded and bute to unsecured creditors? | | |
| a | ny exempt property is | ∏No. | | | | |
| _ | excluded and administrative expenses | <u>-</u> | | | | |
| a | re paid that funds will be | Yes. | | | | |
| | available for distribution | | | | | |
| t | o unsecured creditors? | | □ 1,000-5,000 | 25,001-50,000 | | |
| | low many creditors do | ■ 1-49 □ 50-99 | 5,001-10,000 | ☐ 50,001-100,000 | | |
| • | you estimate that you owe? | ☐ 100-199 | ☐ 10,001-25,000 | ☐ More than 100,000 | | |
| • | | 200-999 | | | | |
| | Ularraman da var | \$0-\$50,000 | ☐ \$1,000,001-\$10 million | □\$500,000,001-\$1 billion | | |
| | How much do you estimate your assets to | \$50,001-\$100,000 | \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion | | |
| | be worth? | \$100,001-\$500,000 | ☐ \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion | | |
| | | \$500,001-\$1 million | ☐ \$100,000,001-\$500 million | ☐More than \$50 billion | | |
| | How much do you | □ \$0~\$50,000 | □ \$1,000,001-\$10 million | ☐ \$500,000,001-\$1 billion | | |
| | estimate your liabilities | \$50,001-\$100,000 | ☐ \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion | | |
| | to be? | \$100,001-\$500,000 | ☐ \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion | | |
| | | □ \$500,001-\$1 million | ☐ \$100,000,001-\$500 million | ☐ More than \$50 billion | | |
| Dort | Zi a Balaw | | | | | |
| Part or y | | I have examined this petition, and correct. | I declare under penalty of perjury that the in | formation provided is true and | | |
| - | | If I have chosen to file under Cha of title 11, United States Code. I u under Chapter 7. | pter 7, I am aware that I may proceed, if eligi understand the relief available under each ch | ble, under Chapter 7, 11,12, or 13 apter, and I choose to proceed | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | |
| | | with a bankruptcy case can result | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | |
| *************************************** | | * Meria Signature of Debtor 1 | L.Bearden * sig | nature of Debtor 2 | | |
| | | Executed on : 611 | | ecuted on | | |
| * | | EXECUTED OIL | 7 / ۷۷۷ | MM / DD / YYYY | | |

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| Fill in this inf | formation to identi | fy your case: | |
|---------------------------|---------------------|-----------------------------------|------------------------|
| Debtor 1 | Verlaria | L | Bearden |
| Debtor 2 | First Name | Middle Name | Lastivanio |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| | | the : <u>NORTHERN</u> District of | f_ILLINOIS_ (State) |
| Case Number (If known) | | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| | | Sign Below | | | | | |
|-----------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| *************************************** | No | | • | | | | |
| *************************************** | Yes. | Name of Person | · | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | المرات ال | is dealeration and that they are true and | | | |
| | Under per correct. | nalty of perjury, I declare that I have read the summary an | d schedules filed with th | is declaration and that they are document | | | |
| *************************************** | X Signa | Verlaria L Bearden * | Signature of Debtor 2 | | | | |
| *************************************** | Date | : <u>le 1 / 1/2</u> 016 MM / DD / YYYY | Date | // | | | |
| - | | | | | | | |

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| Debtor 1 | Verlaria | L | Bearden | Case Number (if known) | |
|----------|------------|-------------|-----------|------------------------|--|
| | First Name | Middle Name | Last Name | | |

| Part 12: Sign Below | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|--|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 | | | | | |
| Date 6 / 7 /2016 MM / DD / YYYY | DateMM / DD / YYYY | | | | |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? | | | | | |
| No | | | | | |
| Yes | | | | | |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | | |
| ■ No Yes. Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |

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DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
 b. Failure to keep books and records documenting your financial affairs.
 c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
 d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others.
 e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
 f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filling, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE.

Dated: 6 / 1/2016

aria O. Bearden

Verlaria L Bearden

X Date & Sign

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Verlaria L Bearden / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

711291

Record #

Verlaria L Bearden

X Date & Sign

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Verlaria L Bearden

Date: 6 / 17/2016

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Form B 201A, Notice to Consumer Debtor(s)

In re Verlaria L Bearden / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 61/7/2016

Verlaria L Bearden

X Date & Sign

Dated: <u>6 / 6</u>/2016

Attorney: Cecil Denard Scruggs